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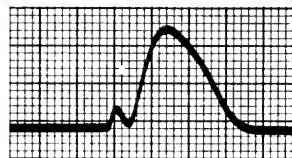
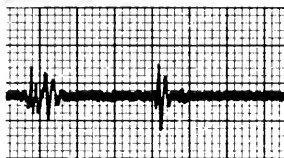
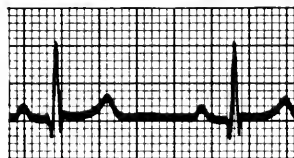


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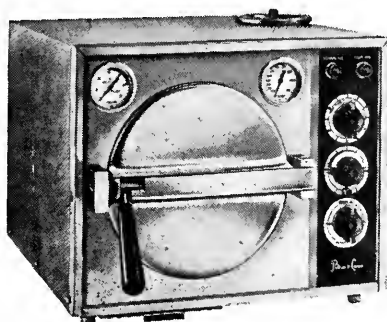
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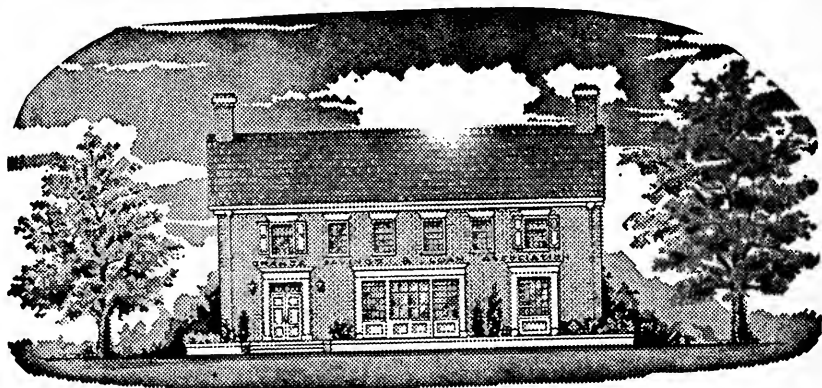
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THE BULLETIN

OF THE SCHOOL OF MEDICINE
OF THE UNIVERSITY OF NORTH CAROLINA

Published in cooperation with the Whitehead Medical Society
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Vol. XIV

December, 1966

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UNC scientists who developed the new plasma fraction are (left to right) Dr. Robert H. Wagner, Associate Professor of Pathology and Biochemistry, Dr. Kenneth M. Brinkbous, Professor of Pathology, Dr. Harold R. Roberts, Associate Professor of Pathology and Assistant Professor of Medicine, and Dr. William P. Webster, Assistant Professor of Pathology and Oral Pathology.

New Plasma Fraction for Treatment of Hemophilia

A new plasma fraction representing a significant advance for the treatment of hemophilia has been developed by a group of investigators here at the School of Medicine.

The new fraction is a concentrate of antihemophilic factor prepared from human plasma by use of an amino acid, glycine. It is being called Fraction AA since an amino acid is used as a precipitating agent.

The new fraction offers great advantages over plasma or other readily available fractions for the treatment of hemophilia. It is simple to prepare, as only a single precipitating step is required. Also, it is stable and may be stored for indefinite periods. The antihemophilic activity of a 500 cc. unit of blood is contained in a volume of about 30 cc., thus permitting injection of large doses of the antihemophilic factor without increasing plasma volume. This obviates the hazard of hypervolemia attending the use of large volumes of plasma.

The fraction was developed by four scientists, Drs. W. P. Webster, R. H. Wagner, H. R. Roberts, and K. M. Brinkhous in the Pathology Laboratory at North Carolina. Collaborating in scaling up the procedure to make the material widely available was Dr. G. M. Thelin of Hyland Research Laboratories of Los Angeles. Dr. Thelin, a hemophiliac himself, earned a Ph.D. in Biochemistry from U.N.C. in 1960.

After safety tests had been passed and the Division of Biologic Standards approved the IND application (Investigational Use of New Drug), the local Clinical Research Unit Supervisory Committee approved the testing protocol. Drs. Roberts and Webster by now have administered Fraction AA to a number of bleeder patients who did not have the antihemophilic factor in their blood. The average amount of fraction given was equivalent to eight liters of plasma. Antihemophilic factor levels in the plasma have been elevated to normal and maintained with repeated injections of the fraction.

Patients also have undergone surgical operations without excessive bleeding after administration of the fraction. Even with large doses and repeated injections, no untoward side effects have been noted.

The success of this fraction in stopping and preventing hemorrhage in hemophilia was reported at the last meeting of the American Society of Hematology in Philadelphia and more recently by Drs. Webster and Brinkhous in Sydney, Australia and Edmonton, Canada. Investigators in other parts of the United States have also tested the material developed here and have also reported good results.

Dr. Harold Roberts prepares a vial of the fraction for administration to one of the patients with classic hemophilia, tested as a volunteer during the initial clinical studies. These studies were carried out in the Clinical Research Unit of the N. C. Memorial Hospital (treatment room shown here). The Clinical Research Unit played a vital role in the successful application of the fraction to clinical use.





Whitehead Society Officers and Representatives (left to right): James Wallace, Treasurer; John Thornburg; Robert Shearin; Rudy Mintz; Richard Fleming; Joel Rothermel, President; David Rendleman; Robert Whitley, Vice-President; Roberta Williams, Secretary; Jerry Norton; Jim Goodwin.

Whitehead Society Day . . .

September 14, 1966

The formal phase of Whitehead Society Day was held in the medical school auditorium and was presided over by Society President, Joel Rothermel. Following announcement of scholarship winners by Dean Taylor, Dr. Louis G. Welt, Professor and Chairman of the Department of Medicine, delivered the Whitehead Lecture entitled "The Art of Medicine." In the evening students and faculty moved to Durham for a lively affair at Josh Turnage's which featured an address by Dr. Robert A. Ross.

The scholarship winners (shown on the following pages) were as follows: Gerald W. Blake received the Walter Reece Berryhill (Class '25) Scholarship, established by the Medical Parents Club of U.N.C., awarded annually to a rising senior on the basis of overall academic excellence since entering medical school. The H. McLeod Riggins Scholarship, established by Dr. H. McLeod Riggins (Class '22) of New York City, awarded annually to a rising junior on the basis of overall academic excellence during the preceding two years, was received by Thomas L. Henley. Alumni Loyalty Fund Merit Awards established by the School of Medicine with funds provided by its alumni are awarded annually to two members each from the Senior, Junior, and Sophomore classes on the basis of academic excellence for the preceding year. The senior recipients were Jerry L. Norton and Barbara J. Parks. The junior recipients were Stephen W. Young and Michael D. Lutz. The sophomore recipients were Henry M. Middleton III and William T. Rowe.



Senior scholarship winners are (left to right) Gerald W. Blake, Barbara J. Parks, and Jerry L. Norton.

Sophomore scholarship winners are William T. Rowe (on the left) and Henry M. Middleton.



Junior scholarship winners are (left to right) Stephen W. Young, Thomas L. Henley, and Michael D. Lutz.





Dr. James H. Scatliff (left), recently appointed Professor and Chairman of the Department of Radiology, reviews contrast studies of the upper gastrointestinal tract with Dr. Oscar Sapp, Associate Professor of Medicine and Associate Director of the Clinical Cancer Training Program. Through its wide spectrum of diagnostic and therapeutic tools, the Department of Radiology plays a vital role in the Clinical Cancer Training Program.

At the present time the Research Fellows in the Training Program are (left to right) Dr. Robert D. Croom from the Department of Surgery, Dr. Rudolph F. Albert from the Department of Pathology, Dr. William A. Nebel from the Department of Ob-Gyn, and Dr. Michael H. Temko from the Department of Medicine.





Director of the Clinical Cancer Training Program is Dr. James F. Newsome, Associate Professor of Surgery.

Inside N. C. Memorial Hospital . . .

The Clinical Cancer Training Program

A program of patient care, teaching and research in cancer has existed at the North Carolina Memorial Hospital since the hospital opened in 1952. Under the direction of Dr. James F. Newsome, Associate Professor of Surgery, the program has shown steady growth since its inception. Special tumor clinics have expanded with the hospital and a Cancer Registry has been maintained on patients with malignant disease for 13 years. Approximately 8,000 patients have been listed in the Registry during this time. Virtually all patients have been followed to date or to death by clinic visit, a follow-up letter by the referring physician, or by personal follow-up by Registry personnel.

This year the cancer program at the North Carolina Memorial Hospital has begun an important phase of expansion. With a grant from the U. S. Public Health Service, a formal Clinical Cancer Training Program has been

(Continued on page 21)

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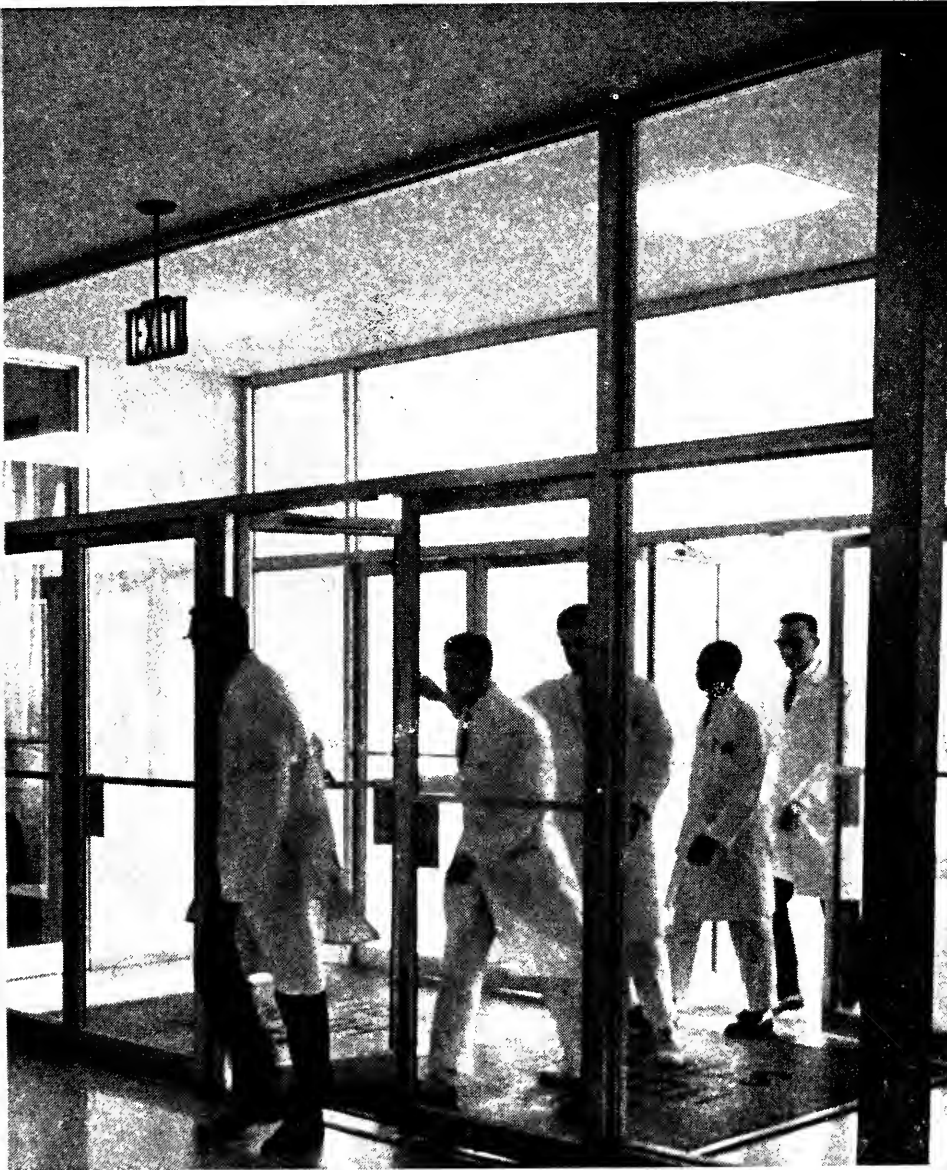
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The Class of 1956—A 10-Year Report

A medical student cautioned the parents of medical students here on Parents' Day that it may be unrealistic to think that a medical education is completed in four years of medical school and a year of internship.

Joel E. Rothermel, now a senior at the University of North Carolina School of Medicine, reported to the UNC Medical Parents Club at their annual meeting on "Ten Years Later—A Report on the Class of 1956."

"By rough calculation," the parents were told, "the members of the Class of 1956 have spent an average of seven and a half years in training beyond the undergraduate level—that is, four years of medical school, one year of internship and an average of two and a half years in residency.

"Three are still in training."

Rothermel reminded the parents that financing such a prolonged educational program has always been a problem.

"A crude estimate of the average cost of medical school, internship and residency, including subsistence, for the Class of 1956 was about \$18,800."

He said that questionnaires returned by the 1956 medical graduates here did not show the exact sources of financing. But he said, three out of five of the graduates had "significant educational indebtedness" when they completed their training—ranging from \$2,000 to \$10,000.

"Six still owe the University for funds borrowed while they were students here," he said.

Rothermel said that the Class of 1956 (selected because it was the first class to receive the benefits of the UNC Medical Parents Club) upheld one of the stated goals of the UNC medical school.

The goal he referred to is to provide physicians for North Carolina and to increase both the quality and quantity of medical care in the state.

"Of the members of the Class of 1956," he reported, "only 10—including those in the military—do not live in North Carolina, and one of the non-residents wants to return."

Other interesting facts gleaned from the medical students of 10 years ago:

*Sixty-five per cent of them planned to become general practitioners (family physicians), but only 24 per cent now are in general practice.

*Ninety-seven per cent of the class served in the armed forces or the U. S. Public Health Service, most after receiving their medical degrees.

*At the time they graduated in 1956, about half of them were married (compared, interestingly, to 65 per cent of married students in this year's graduating class).

Rothermel concluded his report with the comment, "The years have been kind to the members of the Class of 1956.

"Many of us feel that your support added in no small measure to the success of this and subsequent classes."

University of North Carolina

SCHOOL OF MEDICINE

First-Year Class 1966-1967

<i>Name</i>	<i>Undergraduate College</i>	<i>Residence</i>
Allsbrook, William Calvin, Jr.	Duke	Clayton, N. C.
Almond, Charles Malcolm	U.N.C.	Red Springs, N. C.
Baggett, Henry Clifford	U.N.C.	Reidsville, N. C.
Bernstein, Jerry Charles	Duke	Wilson, N. C.
Blair, Robert Gillespie, Jr.	Davidson	Winston-Salem, N. C.
Boyles, Larry Wayne	U.N.C.	Hickory, N. C.
Browder, James Patterson, III	U.N.C.	Chattanooga, Tenn.
Busby, Julian Goode	U.N.C.	Kannapolis, N. C.
Busby, William Jarvis	U.N.C.	Salisbury, N. C.
Byrd, William Eugene	U.N.C.	Mount Olive, N. C.
Cameron, Harold Harrington	U.N.C.	Broadway, N. C.
Chafetz, Neil	Cornell	Mt. Vernon, New York
Chang, Bruce Shoo-tang	Princeton	Raleigh, N. C.
Cohan, Robert Henry	U.N.C.	St. Petersburg, Fla.
Crocker, Daniel Lind	Davidson	Selma, N. C.
Crumley, Charles Edwin	U.N.C.	Chapel Hill, N. C.
Dance, Mary Dewey	U.N.C.	Fayetteville, N. C.
Davis, John Shuster	Amherst	Philadelphia, Pa.
Durana, Joan Christine	Duke	Winston-Salem, N. C.
Earp, Henry Shelton, III	Johns Hopkins	Baltimore, Maryland
Farmer, Pamela Ann	Mt. Holyoke	Chapel Hill, N. C.
Freeman, Richard McConnell	N. C. State	Charlotte, N. C.
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Goodwin, James Oscar	U.N.C.	Apex, N. C.
Green, Stephen Lloyd	Pennsylvania	Brooklyn, New York
Gygi, Andrew Charles, Jr.	U.N.C.	Norfolk, Virginia
Hartness, John Frederick, Jr.	Davidson	St. Petersburg, Fla.
Henderson, Frederick Wayland	U.N.C.	Greensboro, N. C.
Herring, Mary Dawn	U.N.C.	Wilmington, N. C.
Hinkle, Robert Linville	U.N.C.	Charlotte, N. C.
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CRUMLEY, C.E.

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GYGI, A.C.

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HENDERSON, F.W.

HERRING, M.D.

HINKLE



KRONCKE, F.G

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LEONARD, J.R.

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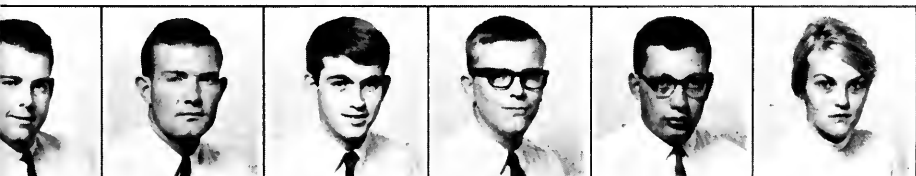
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(Continued from page 17)

<i>Name</i>	<i>Undergraduate College</i>	<i>Residence</i>
Koon, Crawford Bryan, Jr.	Duke	Hickory, N. C.
Kroncke, Frederick, George, Jr.	Duke	Roanoke Rapids, N. C.
Lefler, Charles Deems	U.N.C.	Chapel Hill, N. C.
Leonard, John Richard, III	U.N.C.	Lexington, N. C.
Lokey, Julian Lee, Jr.	U.N.C.	Raleigh, N. C.
McQueen, James Aubrey	Davidson	Laurinburg, N. C.
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Moore, Michael Allan	U.N.C.	Mt. Airy, N. C.
Nelson, William Kolmer	Wake Forest	Clinton, N. C.
Nicholson, Thomas Westray	U.N.C.	Rocky Mount, N. C.
Norfleet, Edwin Alvin	U.N.C.	Goldsboro, N. C.
Oliver, George Motley, Jr.	U.N.C.	Cary, N. C.
Parker, Martha Elizabeth	U.N.C.	Asheville, N. C.
Plenge, Richard Edward	Brown	Lenoir, N. C.
Rendleman, David Atwell, III	U.N.C.	Salisbury, N. C.
Robert, Thomas Adams, Jr.	U.N.C.	Lexington, Kentucky
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Smithwick, James David	U.N.C.	Morehead City, N. C.
Suberman, Christine Oliver (Mrs.)	U.N.C.	Raleigh, N. C.
Suberman, Rick Ian	U.N.C.	Raleigh, N. C.
Sussman, Edward Bart	Rutgers	Park Ridge, New Jersey
Thomas, Charles Carroll, II	Wofford	Hickory, N. C.
Thompson, Charles Eugene	A & T	Rocky Mount, N. C.
Underhill, Thurlow Reed	Virginia	Matthews, N. C.
Vaughan, Ross Leroy, Jr.	U.N.C.	Nashville, N. C.
Walker, Edwin Lance	Davidson	Raleigh, N. C.
Walton, Everette Joseph, Jr.	U.N.C.	Forest Park, Georgia
Weatherly, William Jesse	U.N.C.	Washington, N. C.
White, Gilbert Case, II	U.N.C.	Durham, N. C.
Winfield, Heber Gray, III	Davidson	Washington, N. C.
Winslow, James Elbert, Jr.	U.N.C.	Hurdle Mills, N. C.
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A lighter moment in the Ob-Gyn Tumor Clinic is enjoyed by the patient, Dr. Edgar Douglas, resident in Ob-Gyn (seated on the left) and Artan Davidian, senior student.

(Continued from page 13)

initiated. Under the direction of Dr. Newsome, the program will utilize a multidisciplinary approach to early diagnosis, up-to-date therapy, and periodic follow-up of patients with cancer. This program will offer to afflicted persons the best possible chance for curative therapy and will offer to practicing physicians and trainees both diversified and specific training in the management of malignant disease. Although the etiology of cancer is not yet known, it is evident that much benefit to patients and physicians can be derived from a systematic investigative and training program. To provide this benefit is the purpose of the Clinical Cancer Training program at North Carolina Memorial Hospital.



In the Medical Clinic, Dr. James Bryan, Instructor in Medicine, and Bernie McAdam, senior student, administer a blood transfusion on an out-patient basis to one of the patients being followed in Clinic. In a substantial number of cases, specific and supportive therapy is carried out on an ambulatory basis.



Dr. John Simmons, Assistant Professor of Surgery (on the left) and Dr. Paul Bunce, Professor of Surgery and head of the Division of Urology review an intravenous pyelogram on a patient being followed in the Urology Clinic.

Serving with Dr. Newsome as associate director of the program is Dr. Oscar Sapp, Associate Professor of Medicine. These men will coordinate activities of representatives from virtually all the surgical sub-specialities and from the clinical departments of Radiology, Ob-Gyn, Medicine, Pediatrics, and Psychiatry. From the basic science departments there are members from Pathology, Biochemistry, Pharmacology, and Bacteriology. A major facet of the Cancer Program is an increased application of biostatistical and epidemiologic investigation of malignant disease. These functions will be provided by members of the Departments of Biostatistics and Epidemiology of the

In the ENT Tumor Clinic, Dr. Newton Fischer, Professor of Surgery and Head of the ENT Division, examines a patient who is being followed post-operatively. Seated on the right is Rod Williams, senior student on the ENT rotation.





Important facets of the Clinical Cancer Training Program are biostatistical and epidemiologic investigations of malignant disease. Heading these contributions are (seated on the left) Dr. Bernard Greenberg, Professor and Chairman of the Department of Biostatistics in the School of Public Health and Dr. John C. Cassel, Professor and Chairman of the Department of Epidemiology in the School of Public Health.

School of Public Health. On these pages appear representative, but by no means exclusive, persons engaged in the Clinical Cancer Training Program.

The patient care facet of the program is fully operational at the present time in the form of specialty clinics which meet in the Out-Patient Department on Tuesdays, Wednesdays, and Thursdays. The Cancer Registry, based on the patients seen, represents one of the most complete compilations of experience with cancer in this country.

The training and investigative facets of the program will be built around continuing education for practicing physicians and more specialized traineeships for hospital-based physicians. At the present time, four trainees are enrolled in the program from the Departments of Pathology, Surgery, Medicine, and Ob-Gyn. Eventually there will be additional trainees from these departments as well as from Radiology and Pediatrics. The trainees will have completed at least two years of post-doctoral training before enrollment and will spend one or more years in the clinical cancer training program. Training will consist of learning techniques of diagnosis and patient care, specialized laboratory-based investigation, statistical evaluation of clinical data and therapies, and participation in seminars and clinical conferences. For the practicing physician, there will be continuing education programs utilizing formal and

informal seminars sponsored by various departments participating in the program.

With increased focus on the problems of malignant disease represented by the development of the Clinical Cancer Training Program, it is appropriate that cancer was the subject of the annual post-graduate symposium this year. The symposium was held on November 17-18, sponsored by the Continuing Education Division of the School of Medicine and N. C. Memorial Hospital. The program this year was under the direction of Dr. James F. Newsome and was entitled "Early Manifestations of Malignant Disease." Visiting speakers were Dr. Ralph Richart, Professor of Obstetrics and Gynecology, Columbia University College of Physicians and Surgeons; Dr. Henry S. Kaplan, Professor of Radiology, Stanford University School of Medicine; and Dr. Martin Lipkin, Associate Professor of Medicine, Cornell University School of Medicine. The program also offered small-group seminars for participants conducted by Faculty from the North Carolina Memorial Hospital and Guest Faculty from Duke University.

While no solutions to fundamental problems in malignant disease can be guaranteed in any clinical cancer program, there is much that needs to be done to consolidate the major gains in diagnosis and therapy that have been achieved. The Clinical Cancer Training Program at this hospital will promote such consolidation. Already the Program represents yet another major activity within the N. C. Memorial Hospital in which multiple departments are effectively engaged in coordinated patient care, teaching, and research.



Shown here are the members of the administrative staff of the Clinical Cancer Training Program, who under Dr. Newsome's direction supervise the diversified Cancer Program. Left to right they are as follows: Mrs. Vicky Ward, Tumor Clinic Secretary; Mrs. Betty Livingston, Supervisor of the Tumor Registry; Mrs. Joy Pierce, Social Worker; and Miss Jean Weaver, Statistical Aide.

Departing Faculty

The *Bulletin* joins the host of Chapel Hill friends of Dr. Clark and Dr. Cadmus in sending best wishes to them in their new posts.

Dr. Henry T. Clark, Jr., former administrator of the Division of Health Affairs at the University of North Carolina and onetime advisor to the U. S. Surgeon General, has been named planning director for the Connecticut Regional Medical Program (RMP) to combat heart disease, cancer, stroke, and related diseases.

Announcement of Dr. Clark's appointment, which became effective this October 1, was made by Dean Vernon W. Lippard of the Yale School of Medicine and Dean John W. Patterson of the University of Connecticut School of Medicine. The two medical schools are providing joint leadership for the federally sponsored program in the Connecticut area.



In his new post, Dr. Clark will direct a two-year program of studies and planning for a future cooperative network in Connecticut among the medical schools, physicians, community hospitals, and voluntary health organizations for research, education, and related demonstrations of patient care. The planning program is supported by a grant from the National Institutes of Health.

His experience in planning and developing medical programs includes extensive service as a consultant and a member of commissions concerned with feasibility studies and long-range program projections at the state, national, and international levels. He has worked with the United States Public Health Service in numerous advisory capacities, including advisor to the Surgeon General, and is at present a consultant to the Agency for International Development of the United States Department of State. Since 1956 he has been special consultant on planning, activation, and operation of the Puerto Rico Medical Center.

A native of Scotland Neck, North Carolina, Dr. Clark received his A.B. degree from the University of North Carolina in 1937 and completed two years of his medical education there. He earned his M.D. degree in 1944 at the University of Rochester School of Medicine, where he was a post-doctoral fellow in pathology for one year before serving his internship at Duke University Hospital.

From 1946 to 1948 he was administrative assistant and assistant director of Strong Memorial Hospital, Rochester, New York. In 1948 he was named director of Vanderbilt University Hospital, Nashville, Tennessee, where he remained until his appointment in 1950 to the faculty of the University of North Carolina.



A physician with over 20 years of experience as a hospital administrator, *Dr. Robert R. Cadmus*, took over as president of the New Jersey College of Medicine and Dentistry on June 30. He succeeds *Dr. James E. McCormack*, who will become director of the New York Academy of Medicine next January (MWN, April 22). As the new president, *Dr. Cadmus* will aid in development of the college's projected university hospital and in the upgrading of patient care in the hospitals that the college serves. His service while at the University of North Carolina, where he has been since 1950, is particularly relevant. Appointed as professor of hospital administration in 1950, he became chairman of the department when it was created in 1962

to extend the influence of the medical school to community hospitals. In addition, he has been consulting director of the North Carolina Memorial Hospital, which he headed from 1950 to 1962. A former director of Columbia's Vanderbilt Clinic and assistant director of University Hospitals of Cleveland, he has been the principal investigator in numerous government-sponsored health care projects. (From *Medical World News*)

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Presenting the Faculty



Dr. G. Philip Manire has become chairman of the Department of Bacteriology and Immunology at the University of North Carolina School of Medicine.

He fills a vacancy created by the retirement of Dr. D. A. MacPherson, who joined the medical faculty here in 1923 and established the Department of Bacteriology six years later.

Dr. Manire came to the medical school in 1950 as an assistant professor of bacteriology and immunology. He became a full professor in 1959.

He has served during the past year as assistant vice chancellor for health affairs. No successor has been named yet to this administrative position.

Dr. Manire is a native of Roanoke, Texas, and was a teaching assistant at North Texas University in Denton, where he earned his bachelor's and master's degrees. He was honored this spring by his alma mater with a Distinguished Alumnus Award.

He has been a Research Fellow at the University of California and a Fulbright Research Scholar at Statens Serum Institut in Copenhagen, Denmark.

Three years ago he was named Alan Gregg Travel Fellow in Medical Education and went to the Institute for Virus Research at Kyoto University in Japan as a visiting professor.

Dr. James H. Scatliff, a radiologist at the Yale University School of Medicine for nine years, has become professor and chairman in the Department of Radiology at the UNC School of Medicine.

He is a 39-year-old native of Chicago, Ill., completed his undergraduate studies at Northwestern University in 1949 and earned his medical degree there in 1952.

Dr. Scatliff joined the Yale medical faculty as an instructor in 1957. He was an associate professor prior to coming to UNC this summer.

His research interests are focused primarily on neuro and cardiovascular radiology.

Dr. Scatliff is a member of the Radiological Society of North America, the Association of University Radiologists, the American College of Radiology and the American Society of Neuroradiology.

He is married to the former Irene B. Andresen of Minneapolis, Minn., and they have one child, Julia Christina Scatliff.



Dr. John B. Graham, professor of pathology, has been named one of two Alumni Distinguished Professors at the University in Chapel Hill. The professorships are derived from the Alumni Annual Giving. Dr. Graham, a native of Goldsboro, came to the University as an instructor in pathology in 1946 after two years with the U. S. Army Medical Corps during World War II. He was selected as a Markle Scholar in Academic Medicine three years later and became a full professor in 1958. He now serves also as chairman of the Policy Board of UNC's new multimillion dollar Population Center.



Dr. Edward McG. Hedgpeth, director of the Student Health Service at the University of North Carolina in Chapel Hill, has been designated the Taylor Grandy Professor of Clinical Medicine. The professorship is named in honor of the late Taylor Grandy, a newspaper publisher who graduated from UNC in 1885. It is in recognition of respected character and accomplishment in the art and philosophy of living. Dr. Hedgpeth is a native of Elm City and a graduate of UNC. He became associate university physician in 1934 and was elevated to university physician in 1941.

ADDITIONAL CONTRIBUTORS

We regret that through an oversight the names of the following alumni were inadvertently omitted from the Honor Roll of Contributors to the 1965 Loyalty Fund and the Alumni Building Fund.

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The Medical School gratefully acknowledges the thoughtful support of these alumni in 1965 along with that of other alumni contributors.

"Monroe's Marauders" In Vietnam

A U. S. Army medical team which narrowly escaped a Viet Cong ambush while operating near a village in Vietnam has been nicknamed for Capt. William M. Monroe of Sanford, a 1964 medical graduate of the University of North Carolina.

U.S. Wolfhound infantrymen in southern Hau Nghia Province now refer to the 25th Infantry Division Medical Civic Action Program (MEDCAP) team as "Monroe's Marauders."

Dr. Monroe, 27, is the Second Battalion surgeon.

Stars and Stripes, Armed Forces-authorized publication in the Far East, reported that Dr. Monroe's team is fighting both disease and ambush in Vietnam.

"Shortly after the medics began operating in the hamlets of Tan My, Hiep Hoa, Duc Hue and So Do," the publication stated, "the villagers reported that the Viet Cong had threatened to kill the members of the team.

"Army of the Republic of Vietnam (ARNV) units in the area beat off two VC attempts to mine the route taken by the medics into Tan My, but were unaware of an ambush planned on the outskirts of Hiep Hoa, two miles away.

"A 40-pound command-detonated mine was set off as the Wolfhound ambulance roared down the road with two gun-jeps."

The mine missed only because the medics surprised the Viet Cong by traveling about 40 miles an hour.

Captain Monroe served his internship at Tripler General Army Hospital in Hawaii before being assigned to Vietnam last January. His wife, the former Blanche Kammer, is also of Sanford.

He expects to return to the U. S. in January and plans tentatively to begin a residency in ophthalmology at N. C. Memorial Hospital here next summer.

Capt. and Mrs. Monroe have two children, two-year-old Will, born in Hawaii, and six-month-old Christina, born in Sanford while her father was in Vietnam.

Captain Monroe is the son of Mr. and Mrs. John Stuart Monroe of Sanford and is a UNC graduate. Mrs. Monroe is the daughter of Mr. and Mrs. B. B. Kammer of Sanford and is a graduate of East Carolina College.

Mrs. Kammer was a teacher in Hillsborough before moving to Hawaii with her husband in 1964.



Officer Hackney makes parking rounds at high noon outside N. C. Memorial Hospital.

Dr. Yamazuki On Parking

A fundamental discrepancy between the number of cars eligible for parking at N. C. Memorial Hospital and the number of cars which can, in fact, become parked appears to exist. Sensing this discrepancy, Dr. Oyaji Yamazuki, traffic expert with the National Institutes of Podiatry and no mean cross-country runner himself, has come to us and has just issued a preliminary report on the parking problem.

In a hard-hitting analysis, he points out that (1) there is indeed a problem here and that (2) there are three possible solutions: (a) develop more parking spaces above, on, or below the ground; (b) stop driving to work and find other means of locomotion, such as running; (c) drive to work ahead of everybody else, thereby easily finding space. In a computerized analysis of parking patterns, he found that abundant parking space exists between 3:00-6:00 A.M., an encouraging observation clearly relevant to Solution "2c" (*see above*). In commenting on his preliminary report, Dr. Yamazuki with customary good sense discounted any likelihood of general acceptance of Solutions "2a" and "2b". He recommended early driving to work as the most creative solution to the parking problem.

There were some questions about this report and these were aired at a recent campus meeting. A professor felt that Solution "2c" would simply transfer confusion to an earlier hour. Dr. Yamazuki suggested solving one problem at a time. A further major question was in regard to the fogginess that many feel upon early awakening. In hushed and almost reverent tones, the doctor answered, "As Thoreau said, there is no serenity so fair as that seen through a misty eye." The meeting was closed with formal expression of appreciation to Dr. Yamazuki.

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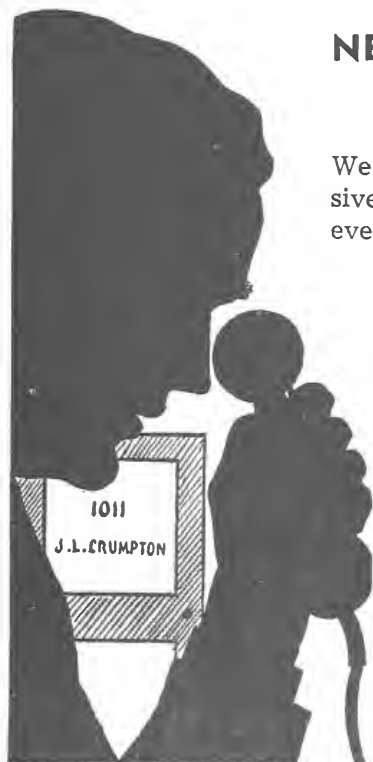
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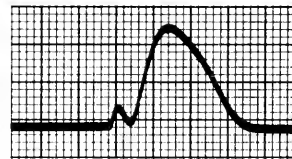
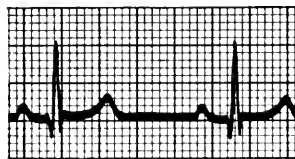


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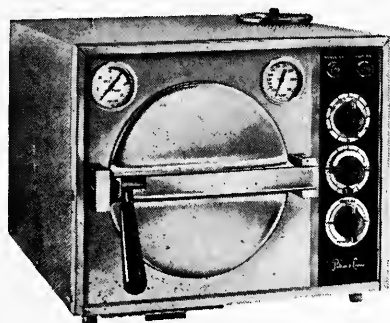
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The Second Annual Merrimon Lectureship

Dr. William Bosworth Castle, Francis Weld Peabody Faculty Professor of Medicine, Harvard University, will give the Second Merrimon Lecture in Hill Hall on the campus of the University of North Carolina, Chapel Hill, on Wednesday evening, March 22nd, at 8 p.m. Dr. Castle will be in residence in the School of Medicine during the week of March 19th. During this period he will conduct clinics and conferences with the students of medicine.

Dr. Castle has pioneered in the field of megaloblastic anemias, particularly pernicious anemia. In 1929, he with his students found that the gastric contents of a normal person during the digestion of meat was curative when fed to a patient with pernicious anemia. This work led to the hypothesis which recognized that normal erythropoiesis depends upon the presence of a substance of unknown constitution generally referred to as the haemopoietic or anti-pernicious anemia principle. The principle is formed in the stomach by the interaction of two factors, the extrinsic factor, now known as vitamin B₁₂, and an intrinsic factor which is believed to be a gastric secretion which binds and specifically facilitates the absorption of vitamin B₁₂. A lack of the intrinsic factor results in impaired vitamin B₁₂ absorption and leads ultimately to the deficiency disease pernicious anemia, characterized by a megaloblastic anemia, and disturbances of the central nervous system. Dr. Castle has received many honors for his pioneering work in this field.

The Merrimon Lectureship in Medicine was established in 1963 as a Foundation by the late Dr. Louise Merrimon Perry in respect and honor of the great traditions of the science and practice of medicine. It was her wish that the lectures be concerned with the origins, traditions and history of the medical profession and the ethical philosophy which must dominate this field of human endeavor. It is intended that these lectures be given to medical students and others interested by men and women distinguished in their profession through an humane attitude toward the practice of medicine.

The first annual Merrimon Lecturer was Dr. Nicholson Joseph Eastman, Emeritus Professor, The Johns Hopkins University School of Medicine. Dr. Eastman spoke on "Induced Abortion and Contraception: A Consideration of Ethical Philosophy in Obstetrics."

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A Letter From Capt. Robert E. Price

I left Ft. Campbell, Ky. by army aircraft to fly direct to Bein Hoa, 30 miles south of Saigon, on a 46 hour flight that ended up being 72 hours due to repeated engine trouble. We arrived here at midnight and were taken to our living area (tents). The remainder of the battalion arrived by ship about 3 weeks later. I spent most of the first 3 weeks finding my way around. I was surprised to find so many doctors in the immediate area. In the 173 Airborne Bde are 9, the 3rd and 7th MASH (Mobile Army Surgical Hospital) about 1 mile away with 14 each and the 93rd Evac. Hospital about 5 miles away with 40 doctors for a total of 77 doctors in a 5 mile area. Also by December 2 more Evac Hospitals are supposed to move in the area. William Monroe from my class is with the 25th Infantry Division at Chu Chi, Everette James was at UNC for his first 2 years of medical school and Herb Johnson chief resident in radiology at UNC in 1962 are at the 93rd Evac. Hospital. Ed Sutton, the former football star, is a doctor at the 3rd MASH so there are a few old Chapel Hill people in the area.

I spend most of my time in the field with just what you can carry on your person. The battalion became operational in our base camp only 20 days. The first operation lasted 27 days. During this period we had 6 people killed in a helicopter crash and 62 evacuated from the field from the battalion (900 people). The breakdown is as follows: injuries 15, skin and foot infections, 16, FUO 3, V.D. 5, other infections (sinus, etc.) 3, gastroenteritis 3 and assorted problems 16. Shortly following the operation we had 20 cases of falciprium malaria in spite of taking the Chloroquine tablets. During the operation I stayed in the supply base with the Med. Evac. helicopter so I could go out if any units were under fire. I did about 9 hours of flying on medical pick ups. Following a helicopter crash, I went in to help with the injured. As we were coming out of the small opening in the trees the V.C. started shooting and the helicopter took a hit about 3 feet from my seat.

The next large operation was Operation Toledo, which I understand was on national news because of the marines landing over the beach. This time since we were operating in one large unit and the area had few places that a helicopter could land I walked with the battalion. We were taken in on a helicopter assault (picture in Newsweek 12 Sept. 66). For 21 days we walked through the jungle, trees 150 feet high, sometimes so thick you could not see the sky. They dropped food every two days and we got water and washed in the local streams. This time we had only 1 killed. The 3rd day out a mortar round hit the column 50 yards from me, killing one instantly. One had his foot blown off and one had a large fragment go through his thigh. These two were

Editor's Note: Last year *The Bulletin* (Vol. XIII, No. 3, page 10) printed a letter from Dr. Robert Cowan (Class of '63) written from Viet Nam. We are happy to report Dr. Cowan has now resumed his "prewar" role as resident in medicine at Columbia's Presbyterian Hospital. Because of the wide interest expressed in Dr. Cowan's letter we have printed some observations by Dr. Robert Price (Class of '64) regarding the situation as he now sees it in Viet Nam. This letter was originally sent to Dr. Womack who, along with Dr. Price, has given us permission to reprint it here.

evacuated by having a helicopter hover over the trees, drop a cable down and then pull them through the trees to the helicopter. These people were in surgery 60 miles away about 60 minutes after they were hit. We had 8 others with minor fragment wounds that I evacuated the following day when we found an opening where the helicopter could land. On the last part of the operation we found 4 V.C. base camps and destroyed numerous supplies. What the V.C. are able to build in the jungle with almost no equipment is hard to believe. On this operation we evacuated 98 people as follows: injuries 26, skin and foot infections 17, FUO 18, V.D. 8, infections (sinus, etc.) 12, gastroenteritis 5, assorted problems 12. Following this operation we had 90 cases of malaria mostly in 2 companies. This came from the V.C. positions we found. Among the supplies we found was quinine so they must have also had malaria problems.

Two days ago we returned from a 10 day operation to secure a landing strip for the 1st Inf. Division. During this period we had fights with the V.C. almost daily. We had 2 killed and 9 wounded. We killed 14 V.C. We set up aid stations since we were 30 minutes flying time from medical support (1 hour round trip). We had a helicopter with us to use. I had one busy day. One company came under fire in the morning receiving 1 wounded so I went in with the helicopter. Just as we were about to land the V.C. started shooting with a machine gun at the plane which took 6 hits, 2 through the engine and 4 through the bottom, gas tanks and along my seat. Gas was all inside the helicopter and blowing out the doors. We made it back to the clearing and landed. I got another helicopter and went back out. I had to go back out 3 more times as we had 1 killed and 5 wounded that day.

The problem is not the injuries or combat casualties. As you can see, malaria (110 cases since July) has been the big problem as the chloroquine tablets are ineffective against falciparum in a number of cases. Also after about 15 days walking in the jungle, staying wet and unable to stay clean, the number of skin and foot infections start to be a problem. Some get marked cellulitis, while others get multiple abscess all over the body. These take the individual out about 14 days with antibiotics and drainage. The venereal disease is mostly due to gonococcus, but I have seen several cases of syphilis and lymphopathia granuloma.

This is about all I can think of that may be of interest. If you have time let me hear about any changes at NCMH.

Captain Robert Price, Jr. Headquarters Co., 4th Bn. 503rd Inf.
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"The Carolina Population Program"

By JOHN B. GRAHAM, M.D.

*Alumni Distinguished Professor of Pathology and Chairman of the Board,
Carolina Population Center*

"The great university responds to the challenges of each age."

As I understand the motives of the founders of the University of North Carolina, they intended that we produce the trained leaders needed by the State. The culture of the late 18th and early 19th centuries demanded a broadly educated and humane alumnus prepared to serve society as statesman, clergymen, lawyer, physician or teacher. Later in the 19th century, the need arose for persons more narrowly but intensively trained to meet the demands of the evolving industrial society. At mid-20th century, the university is aware that it must produce both broadly educated business and professional men and highly specialized technologists.

Today, however, I perceive a new demand upon our institutions, which originates in the complexity of the problems which the world now faces. A partial list of these problems includes the threat of nuclear annihilation, poverty in the midst of plenty, rapid depletion of non-accumulating natural resources, pollution of the biosphere, and explosive growth of human populations. I believe that solving these problems will require not only the application of the best thought in many specialized fields but also the harnessing of a wide variety of specialized talents in a search for unanticipated "interaction effects." In short, I believe it imperative that all institutions of our society, including our universities, organize themselves to contribute to solving these problems.

As I view the history of the University of North Carolina, we responded rather well to the demands of the 19th and early 20th centuries, but our record during the past 30 years has not been outstanding. History will show that:

- 1). UNC was *not* a leader in the nuclear revolution of the '30's and '40's.
- 2). UNC was *not* among the leading institutions which established the important area study programs demanded by post-World War II American political responsibilities, and
- 3). UNC was *not* a leader in the molecular biology revolution of the 1950's and 1960's.

With the decisions to establish the Population Center, the Institute of Environmental Sciences and the Institute of Pharmacology and Toxicology,

(Continued on Page 25)

The Academic Climacteric

By ROBERT A. ROSS, M.D.

B.S., 1920, University of North Carolina

Women (sex) is the only primate who has a predictable gonadal senescence, usually at about forty-seven years of age. Academic man (species) has a predictable somatic and, implied, cerebral senescence, usually at about age sixty-five. Many gynecologists consider the female climacterium a disease rather than an epoch and manage it accordingly by substitutional therapy: endocrinologic, psychic and general. In the academic person it is definitely an epoch. The treatment is not as definitive. There is something in common in these phenomena. The events probably signal the end of reproductivity for one and less productivity for the other. There are other similarities. The woman who before the menopause busied herself with purposeful endeavor, who stressed and utilized her capabilities while ignoring or adjusting to minor disabilities, should continue in the same healthy fashion. However, the female who is fascinated with the more unpleasant vagaries of life, who dwells on inconveniences and resents what others consider normal, in all probability will remain unchanged or may proceed downhill. Academic life has its duplicates. In some instances the so-called "change of life" must be a change for the better.

In the female we sometimes encounter premature menopause, a tragedy, often marked by frustration, resentment, querulousness, a person who can become a complaining prematurely old crone. In the academic life we also find people who undergo premature academic senescence, some who remain academic adolescents, some who never experience academic puberty and some who preserve intellectual infantilism. Occasionally there is an academic mongoloid, who is happy and cheerful, has the appearance of an adjusted person, but whose learning and teaching chromosomes have been fouled up.

In medicine there is a term "progeria" where adolescence, maturity and manhood are bypassed and senility is fixed. Storied walls and ivy do not prevent the occasional occurrence of such a syndrome among teaching personnel—prematurely old men fascinated by academic playthings. The best treatment for such aberrants is prophylaxis. Tolerance, however, is usually the rule. Most die on third base. As Osler paraphrases, "A man is sane morally at thirty, rich mentally at forty, wise spiritually at fifty or never!"

The management of the female climacterium can be quite helpful. By early anticipation and healthy conditioning, by reasonable and adequate conversation, by explanation, assurance and by substitutional and supportive therapy, a healthy emotional Indian summer is often obtained.

It should be implicit in diagnosis and treatments that a possible remedy be suggested. It is evident that this writer does not subscribe to the idea that position appointments be "*ad vitam aut culpam*." John Mosely has said, "The great business of life is to be, to do, to do without and to depart," a statement that might well apply as curriculum vitae of medical school faculty. Anthony Trollope in a delightful novel weaves into the plot of his story the ancient practice of having men at age sixty enter a college for peaceful contemplation before a peaceful departure by chloroform. Remember, this was years ago when sweet smelling chloroform could ensure a tranquil exodus; when balanced anesthesiologists gave perhaps unbalanced anesthesia; before unbalanced anesthesiologists gave "balanced" anesthesia with all the associated furor and furore.



"... Trollope would now recommend the simple garrote ..."



"... prematurely old men fascinated by academic playthings ..."

with most orifices being closed or cannulated, blood vessels stuck, cut and catheterized, and with the possibility of a plastic segment orbiting through various atria or eternally in the circle of Willis. No, Trollope would now recommend the simple garrote. Though definitive, the above system never received popular acclaim.

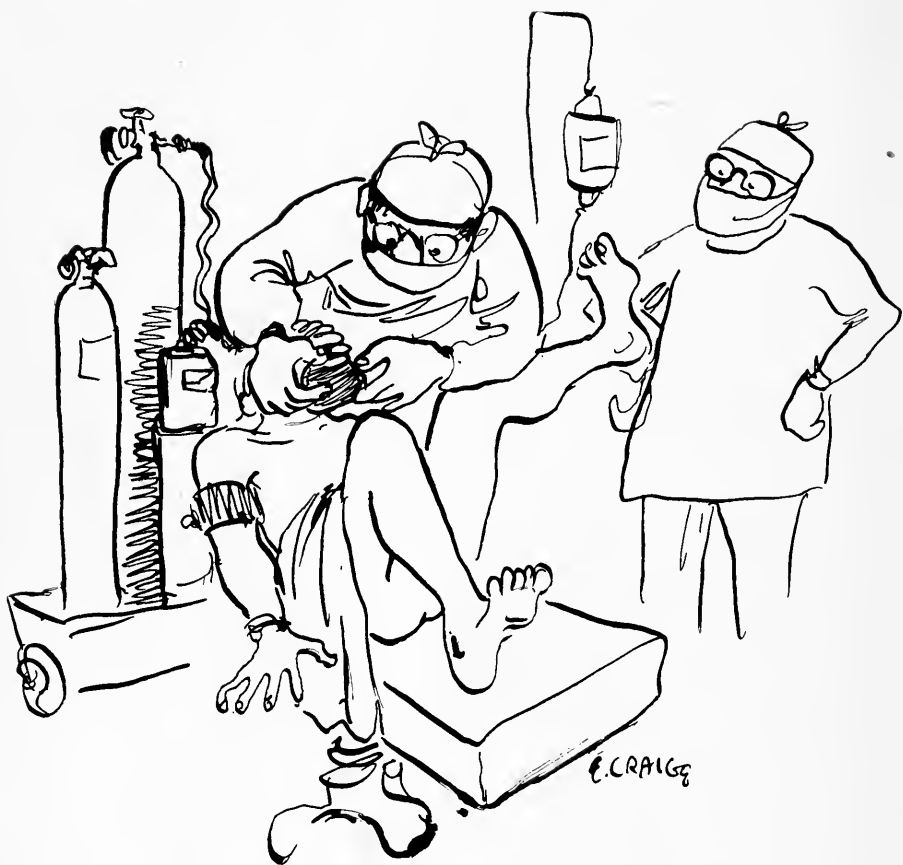
Actually there are many forces at work in medical schools that should ensure productive tenure and healthy replacement. The constant and diligent search for new talent, the "pirating" of proven talent, the lure of foundations and governmental agencies maintain a mild disquietude. The bringing in of "commoners" (this remains undefined) to prevent successive generations of "tired blood" in-breeding, the presence of the rare cheering member who has the temerity to speak up, the dedicated doctor who feels that he should move on—such admirable people still exist.

Even today the teaching faculty is influenced by the Flexner report, but all of this is changing. There are new teaching needs and new teachers, though curricula in general are still somewhere between Mark Hopkins and a computer. This mild chaos should act as a vaccine against academic lassitude and progeria but will not establish complete immunity—there remains human stupidity which always comes as a shock.

In 1765, John Morgan presented a program to his trustees in Philadelphia that comprised practically all elements of medical institutions: affiliation with a university, qualified professors, thorough premedical preparation of the students, a planned curriculum with well defined courses of instruction introducing the basic scientific studies before clinical work, close relationship with a teaching hospital, a library, high standards for graduates, all were not only mentioned but expounded at length. It is almost sinful that this advice was not followed. Yet, we probably would have had to wait for the social sciences to become manifest and offer both the challenge to and the potential for aid in our present day teaching and contemplated curriculum changes.

There are some of us ancients who did not ripen during one of the better vintage years when the dose of any medicine was "enough," not units, animate or inanimate; when the surgical homily was "cut well, sew well, get well"; when early ambulation at home was the rule (usually ambulating to the back house.) This is not a plea for the return or revival of any of this, but simply might be an explanation of a difficulty in reconciling some practices we encounter: recording patients' weight and temperature in avoirdupois and Fahrenheit while judging dosage and analysis in the metric system, height and body measurements both in long measure and metric. Time measure remains constant, probably influenced by the State's rule of a forty hour week—one rule, incidentally, that is most likely to be observed. Language barriers do exist. The festinating lexicon and jargon jalopy have lapped some of us, so "aliquot" could be the latest betting odds on a Cassius Clay bout, or Millimole could well be a relative of "Mini Mouse" or some other rodent. We remain shocked at the sweet young probationed who thought that "Peter Pan" was bed pan's brother. We reject most "ize" words, but do grant the single exception to the morbid pathologists the validity of "finalize."

Certainly there are measures, many, available as aids to the effective teacher who has drawn water and hewed wood, has labored in the academic vineyard and who now, hopefully, is revered but still a Depontani. He certainly can pass judgment on the thoughts and products exhibited by the younger men,



"... Unbalanced anesthesiologists gave balanced anesthesia ..."

whether the results of their efforts are long lasting or ephemeral, whether bright new or refurbished, and can recall Leidy's prayer that,

I might be freed of excited imagination, from the allurements of personal friendship, from the prejudice of education and that I might, under the influence of Divine grace, be permitted to settle this question on its true merits.

He can experience the continuing joy of the association of bright young men proceeding in cyclic formation toward the same rewarding objective and of residents progressing from apprentice, through journeyman to master technicians. The library, personal and institutional, lectures, consultations (solicited), and the constant ebb and flow of an educational institution all are therapeutic.

There are also other light, perhaps perverse opportunities when one sees the fatuous flattened, the pompous punctured, and the silver knight on horseback unhorsed.

Most colleagues are content with the "Pepto Bismol" generation rather than the compulsive "Pepsi" generation. We may know where the action is, but can do little about it. One colleague placed himself in the category, "too late for peccadilloes, too early for petunias." Then there is the rare teacher who is blessed with a proverbial wife who "riseth early, worketh willingly with her hands, planteth a vineyard, stretches her hand out to the poor, studies a field and purchaseth it" (a sort of old testament "Lady Bird"), but best of all she encourages her husband to "sit at the gate of the city among the elders of the land." A real good deal. Certainly her price is far above rubies.

But even if one becomes weary of good doing or "broken at the wheel" he can be content, with one of Kipling's characters, to a life, "Private, unactive, calm, contemplative."

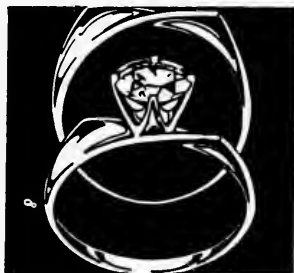
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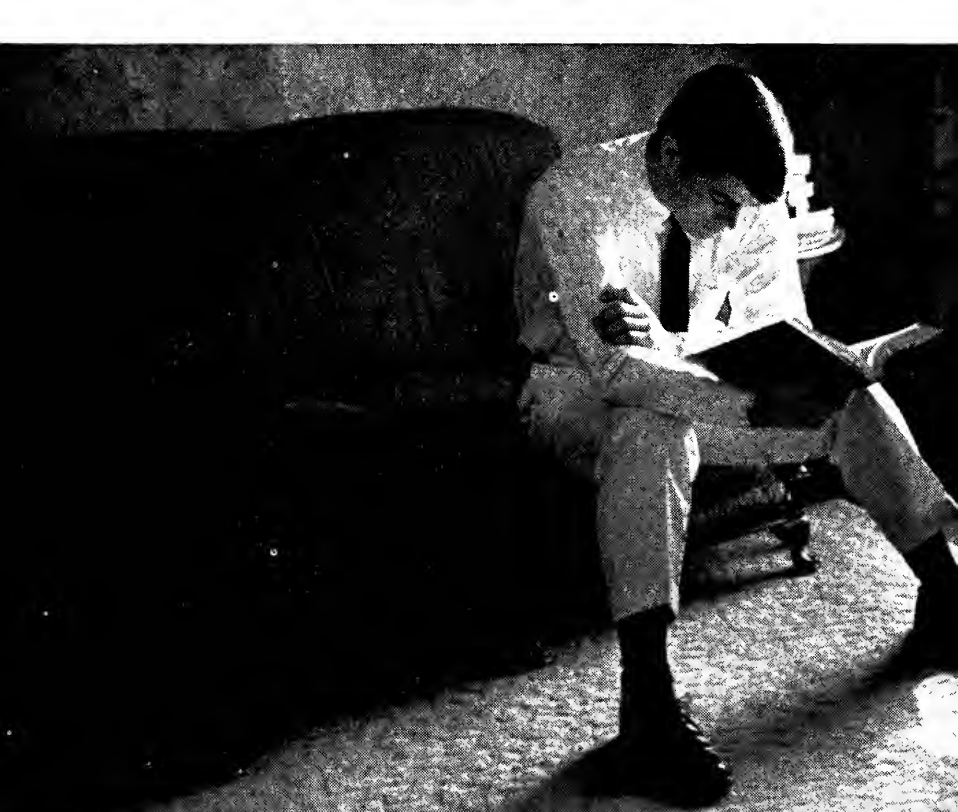
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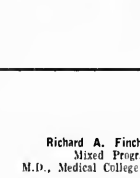
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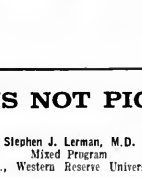
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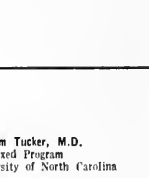
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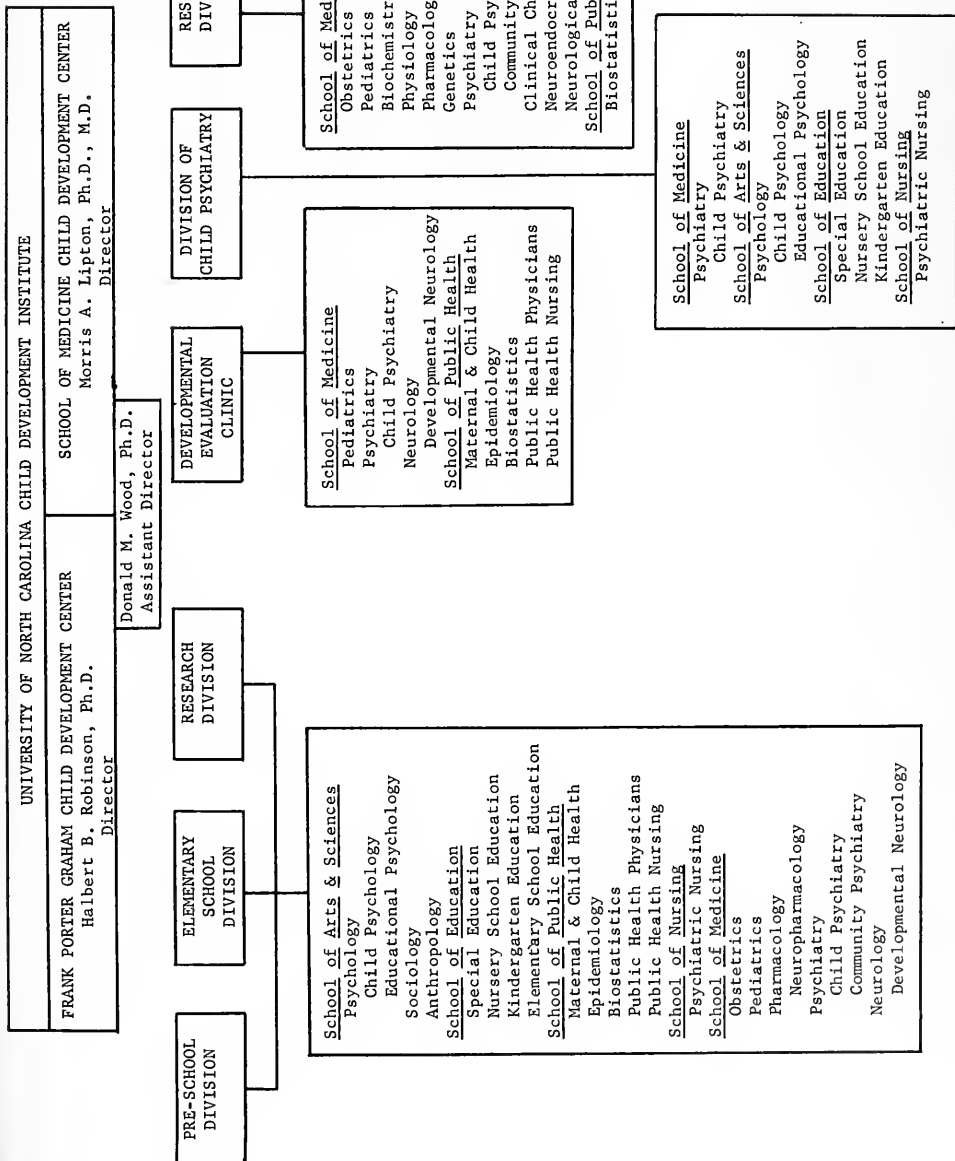
Child Development Institute

The University of North Carolina Child Development Institute is intended to provide a comprehensive approach directed toward the understanding of the complex of behaviors termed "mental retardation." The Institute consists of two physically separate but highly coordinated facilities, the Frank Porter Graham Child Development Center and the School of Medicine Child Development Center. The F.P.G. Center will consist of a seven-building complex located near the site of the existing Frank Porter Graham Elementary School. The School of Medicine Center will occupy a five-story building to be erected immediately east of the existing Psychiatric Center. These facilities, to be completed by 1968, are estimated to cost \$4.2 million. Several of the programs exist in a pilot fashion currently. Others will be accelerated with the completion of the buildings, and all are expected to be in full operation in about five years, with an annual budget exceeding \$5 million.

Frank Porter Graham Child Development Center

The F.P.G. Center, consisting of Pre-School, Elementary School, and Research Divisions, will be directed by Dr. Halbert B. Robinson, Professor in the Department of Psychology. Dr. Robinson is also the Director of the Developmental Psychology Training Program, and is the co-author of *The Mentally Retarded Child: A Psychological Approach*, a widely recognized comprehensive text in the field of mental retardation. He currently serves on numerous state and national advisory councils. This center will be the only full-scale effort at prevention, as opposed to amelioration, of intellectual handicap due to cultural deprivation, in the United States. The physical facilities will include day-care units, pre-school and elementary classrooms, research laboratories and a medical care and health service unit. The center will serve 800 children of working mothers from all segments of the population. Children of different races, both sexes and all socio-economic levels will be included with a primary emphasis on culturally deprived children.

Programs of the center will seek to devise optimum methods for providing cognitive and emotional stimulation, enhancement of motivation for achievement and support of personal and intellectual growth. The best methods for providing day-care in a group setting for children of working mothers will be explored. Interdisciplinary research with a broad professional base and larger population of children than ever before available for such research will be made possible and facilitated by this center. An effort will be made to determine the types of personnel required in pre-school and kindergarten work and to simplify and systematize the training of these people. The center will also offer an ideal setting for training other professional personnel in many phases of work with children. Full medical and dental care will be provided, which has been lacking in all of the over three hundred poverty programs recently surveyed.



This project has been widely acclaimed by professionals throughout the country. It constitutes a unique undertaking, coordinating a long-term study of an exceptionally large group of children with action research designed to put into practice the results of psychological, educational, social, and medical research findings.

School of Medicine Child Development Center

The Medical Center will be directed by Dr. Morris A. Lipton, Professor in the Department of Psychiatry. Dr. Lipton, who holds a Ph.D. degree in Biochemistry, as well as the M.D. degree and Board certification in Internal Medicine and Psychiatry, has been on the Medical School faculty since 1959. He is a recognized authority in the area of psychopharmacology. His previous research activities centered around the biochemistry and development of the central nervous system. He has served on the Mental Health Study Section, and, as chairman, on the Psychopharmacology Study Section of the National Institutes of Health and is currently serving on three committees of the National Institute of Mental Health.

Most of the more than 150 causes of biological retardation presently known antedate the birth of the child and are due to genetic, pregnancy or obstetrical difficulty. Following the birth of the child, infection, malnutrition, emotional deprivation and physical and emotional injury are dominating factors. Because of these diverse causes, the Medical Center program must be broadly based. It will consist of two clinical training and one research section.

Clinically, the Developmental Evaluation Clinic, under the direction of Dr. Harrie Chamberlin, will be concerned with the development and teaching of early diagnostic methods for determining defects. Housed on the main floor of the Medical Center, the D.E.C. will provide examining rooms, a day-care center and classrooms for experimental education for children with sensory or intellectual deficits. The D.E.C. will see 150 new cases and about 1500 follow-up cases per year. Although it will participate in research, its primary mission will be in the training of physicians and ancillary personnel in early diagnostic methods.

The Child Psychiatry Division will have the only university facility in the State for the hospitalization of emotionally disturbed children. It includes eight hospital beds for those children requiring hospitalization while being seen under any program of the center. The Child Psychiatry Division will be primarily a training and behavioral research division.

The Research Division will house laboratories for the conduct of physiological and psychological studies on infants and children, and animal and human studies in cytogenetics, reproductive physiology, experimental embryology and anatomy, physiology and chemistry of the nervous system. Dr. George Summer (Pediatrics) and Dr. John Hill (Pharmacology) will utilize the clinical chemistry laboratory in the Center for the study of biochemical screening methods for inborn errors of metabolism associated with mental retardation. A Medical Genetics Counseling Center, under the direction of Dr. John Graham, will also be a feature undertaking in the Child Development

Center as will extensions of the study of infectious disease on physical and intellectual growth by Dr. Floyd Denny, Chairman of the Department of Pediatrics. The patients under examination and investigation in the Medical Center will comprise three populations: mothers with problems in pregnancy and delivery which might lead to defective children; newborn children and young infants who may be the product of genetic, obstetric, toxic or infectious damage, and mildly retarded children, especially those with emotional difficulties, who will be subjects for long term investigation and treatment.

The Medical Center will be an integral part of the existing School of Medicine and Memorial Hospital complex. The investigators staffing the laboratories will be derived from all of the pre-clinical departments, and the clinical departments of Pediatrics and Psychiatry in the Medical School. They will have access to the clinical and supportive services already established for the research of the Medical School faculty and for the training of graduate students, resident, interns, post-doctoral fellows and medical students.

Thus, the Institute as a whole aspires, through consolidation of the efforts of leading faculty throughout the University to move to and remain at the forefront of scholarship and achievement in the area of child development and mental retardation.

—Population Program—

(Continued from Page 11)

the University has clearly signaled that it intends to grapple with at least two of the major challenges of the next few decades. Our response to these challenges will have a major impact on the shape and programs of the institution. It is my hope that in responding to these challenges we shall firmly establish the university in the first rank of the world's educational institutions.

The following numbered paragraphs attempt to outline succinctly the stages through which the Population Program has passed, describe our current operating principles and list some of the accomplishments which might interest readers of the *Bulletin*.

- 1). The University's Department of Sociology has a long history of interest in demography and has educated many of America's leading demographers. More recently, the School of Public Health has developed a strong interest in implementing programs of family planning.
- 2). In November, 1964, former Chancellor Sharp asked me to become chairman of an effort to build a University-wide program of population studies. This led to appointment of a faculty committee in December, 1964, consisting of 3 sociologists, 3 persons from the School of Public Health, and two persons from the Medical School.

- The committee has since evolved into a Board of Directors and has added representatives from Economics, Anthropology and Journalism.
- 3). The first 9 months were spent obtaining initial operating funds. At present we are receiving support from the Ford Foundation, the Rockefeller Foundation, The Agency for International Development of the U. S. State Department, The National Institutes of Health and the State of North Carolina. Approximately \$3,000,000 have been contributed by outside agencies and the State contributes strongly to the program through support of basic faculty salaries.
 - 4). The executive arm of the program is "The Carolina Population Center." This is now located at 500 Pittsboro Street (the corner of W. University Drive). Three other houses on Pittsboro Street also provide space for persons engaged in our central operations. We hope soon to develop more obvious "visibility," but this depends upon finding enough time to have signs prepared.
 - 5). A number of new faculty have been added to various departments, and graduate assistantships and fellowships have been made available in many disciplines for both American and foreign students.
 - 6). In recruiting faculty, we have followed several principles.
 - a). A faculty member recruited for population studies must be acceptable to and be given an appointment by a regular University department even though his entire salary may be paid by outside funds through the population program.
 - b). It is hoped that all such faculty members will maintain a link with department activities; the degree of involvement will probably vary widely in different parts of the University.
 - 7). We are a University-wide program and are interested in supporting any person or department with a good idea and the capability of contributing to teaching, research or service in the population field.
 - 8). Organizationally, we intend that the membership of our Policy Board reflect all the interested elements of the University.
 - 9). As chairman of the Policy Board, I conceive my responsibility as
 - a). stimulating the inflow of funds and of competent workers into the program and helping to see that they are enabled to carry out their duties effectively,
 - b). fostering the fullest possible involvement in the program by University departments, and
 - c). helping to maximize the benefits of the program to the University, the State and the world.
 - 10). The Director of the Carolina Population Center, Dr. Moyer Freymann, who is a Professor of Public Health Administration with special training in social science, is responsible for our operations with the support of the Policy Board.

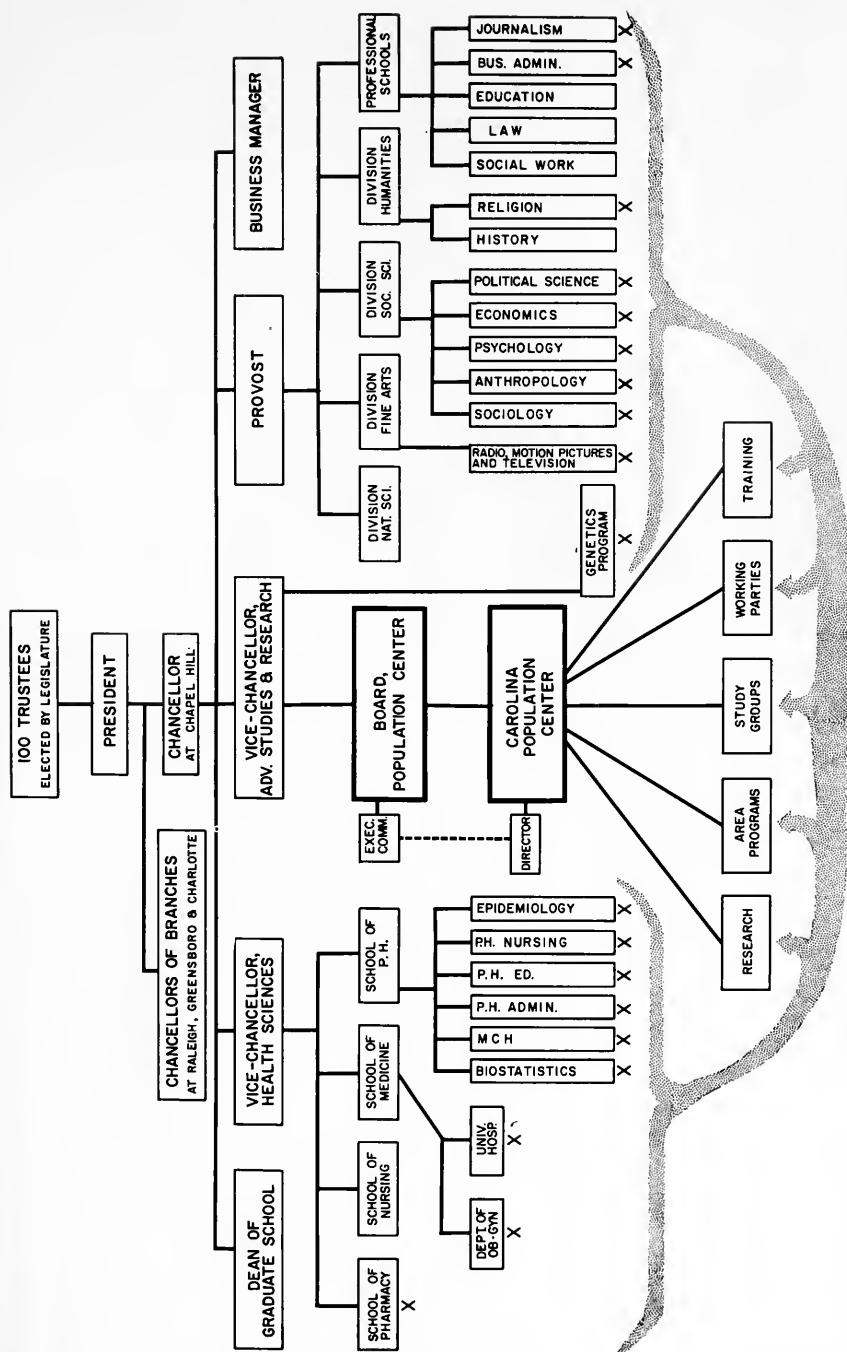
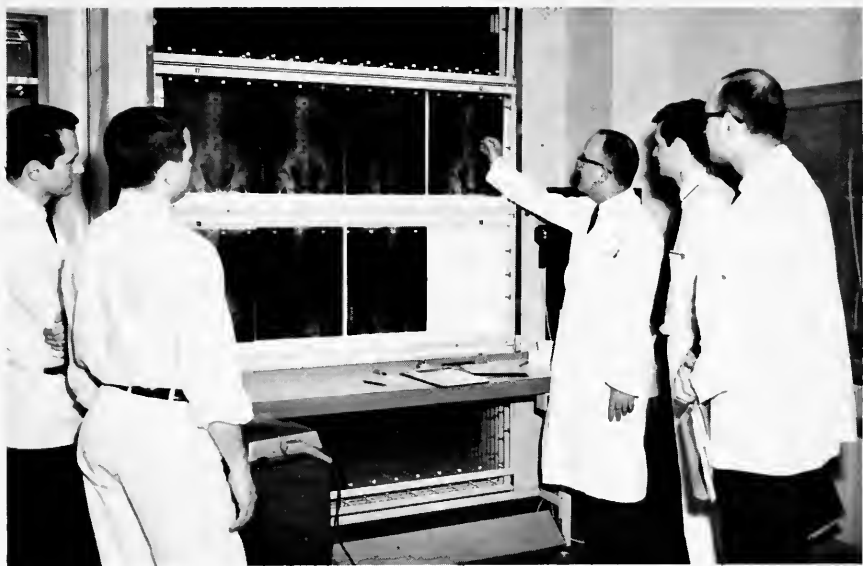


Figure 1—Organization of the program of research and training in population at the University of North Carolina. Departments and schools in which there is some degree of involvement are indicated by the cross (X). The chart indicates the extent of involvement on January 1, 1967.

- 11). The counties of the Health District which includes Chapel Hill are being assisted to develop the services which they require for their own needs. We intend that the family planning program in our health district will become a model which others will wish to emulate.
- 12). Efforts are underway to help State agencies develop policy about population matters. It is clear that the Population Center will be an important resource agency to the State for help and ideas in this field.
- 13). Last year a seminar attempted to pull together ideas about the ideal population for the United States. These lectures have been edited by Professor Daniel Price and will be published soon in a volume entitled: "A Population Policy for the United States."
- 14). Plans are maturing for assistance to Thailand, India and Egypt and we may also "adopt" a country in Latin America. Our role overseas will be largely that of assisting the universities and agencies of other countries to establish centers and programs such as ours. It is clear that we cannot train in Chapel Hill the personnel required by the developing countries. We may be able, however, to educate the "trainers" for some of these countries and provide them with the experience of seeing a model population center in operation.
- 15). Funds provided by The Rockefeller Foundation are now being used to establish teaching, research and service in family planning within the Department of Obstetrics & Gynecology of the Medical School. Before long, we hope to have a clinic going at the N. C. Memorial Hospital in which medical students, nursing students, and house officers can observe and participate. Dr. Jaroslav Hulka, formerly of the Department of Obstetrics and Gynecology of the University of Pittsburgh, has been added to the staff to head up this effort. We have also added to the staff Mrs. Ethel Nash, current president of the National Association of Marriage Counselors. Mrs. Nash, who has had extensive experience in teaching sex education, is teaching our medical students during the current year.

The scope of population activities with the University at Chapel Hill is shown in Figure 1. The crosses (x) below the names of schools or departments indicate activities either in teaching, research or service. The program is changing so rapidly that the chart prepared a month ago is already out of date. Activity has been started since then in the Department of Zoology of the Division of Natural Science. Here Professors Odum and Stiven, who are ecologists, are attempting to develop a scientific language which can be used by workers in all areas of ecology including the study of human populations. I have no doubt but that still other departments and schools shall have become involved by the time this issue of the *Bulletin* is in the hands of its readers.



Left: Dr. Joey Carter and Dr. Ronald Joyner. Right: Dr. C. A. Bream, Dr. George Paddison, Dr. Stuart Levy. The x-ray films taken during an intravenous pyelogram are being reviewed by Dr. Bream with a clinical group. The view box is of the newest multiple panel type which permits a large number of x-ray examinations to be shown by moving consecutive glass panels into position automatically.

Current and Future Events in the Department of Radiology

The developmental goals for the Department of Radiology are both immediate and long-range. During the last year, a space and equipment renovation project has been underway. Architectural changes have included enlargement of the cardiac catheterization laboratory, completion of the neuroradiological suite, and modernization of the patient dressing rooms. A new combination angiographic and general radiographic suite is under construction and should be ready for operation by the spring of 1967. This suite, which will have its own darkroom and rapid processing unit, will enable the department to perform special angiographic procedures for the study of abdominal and peripheral arteries and veins. In addition, routine radiographic procedures, as well as laminagraphy, will be carried out. This laboratory is at the east end of the main second floor corridor of the hospital, and its removal from the main x-ray area will help reduce congestion and waiting periods in the Department.

Fluoroscopy examinations will also be facilitated shortly with the installation of new equipment, which includes image intensification in two fluoroscopy rooms. The x-ray tubes in these rooms will be powered by 220-volt, 3-phase lines, which will allow a considerable increase in generator capacity. These, in turn, will permit shorter x-ray exposure times and greatly enhance film detail.

The departmental consultation area is being enlarged, and a combination viewing and conference room has been established on the second floor, adjacent to the main departmental processing unit. This room has a new motor-driven, multiple panel view box, which will hold the films from 20-30 patient examinations. X-ray films taken during gastrointestinal studies will be placed on this view box and be available for viewing immediately after the examination and throughout the day of the study. In this way, conference viewing, as well as individual house staff examination of the film, will be made easier.

Formal conferences in the first-floor conference room of the department will be improved soon. Pertinent films with lesions of limited size, such as small chest tumors or cerebral aneurysms, will be projected by means of an in-room closed-circuit television. The magnified image of the lesion will appear on a large television monitor, and everyone attending the conference will be able to see the film pathology adequately.

In the coming six months, two new faculty members will be added. Dr. Chongdee Sukthomya, who received part of his radiological training in Thailand and has recently completed a three-year residency in radiology at Michael Reese Hospital in Chicago, will join the department as an instructor. Dr. Orlando Gabriele, who is currently a member of the Department of Radiology at the Yale University Medical Center, has a special interest and experience in cardiovascular radiology and will join the department in the spring. Dr. William Radcliffe, who came to the department last fall, after completion of a neuro-radiological fellowship in England, has helped considerably in neuroradiological consultation, as well as supervision of special angiographic procedures.

Plans are proceeding for the development and equipping of the new diagnostic and x-ray therapy sections in the ambulatory facility. At this time, a 25-mev Betatron is planned for the therapy section. This will provide both x-ray and electron beam radiation for many different types of malignancies. A cobalt unit will also be obtained, and this will add another important treatment method for several types of cancer.

As changes have come about in the administrative aspects of the Medical School *The Bulletin* has presented "thumb nail sketches" of the new personnel involved (see page 31 this issue). We have asked some of these individuals to provide a brief description of the direction they hope their departmental programs will develop in the future. This month Dr. James H. Scatcliff and the Department of Radiology are featured. Radiology are featured.

Presenting the Faculty



William L. Ivey, associate director for three years, recently was appointed director of N. C. Memorial Hospital here, the 425-bed teaching hospital for the University of North Carolina School of Medicine.

He succeeds Eugene B. Crawford, Jr., who resigned to become executive director of the Wilmington (Del.) Medical Center.

Ivey is an assistant professor in the UNC Department of Hospital Administration and a lecturer in the UNC School of Business Administration.

He is a 39-year-old native of Auburn, Ala., earned his bachelor of science degree from Auburn University in 1948 and was awarded a master of science degree at UNC here in 1951.

He interrupted his college career in 1946-47 to serve with the Army's 8th Calvary Regiment in Japan. In 1952, he was recalled by the Army to serve as assistant adjutant for the Chemical Corps Training Command at Fort McClelland, Ala.

For two years before joining the UNC business administration faculty as an instructor in 1954, he was general manager of Ivey Farms, Inc., in Auburn, Ala.

In 1957 he was appointed director of N. C. Memorial Hospital's Private Patient Service here and also became a member of the medical school's Long-Range Planning Committee.

He became associate director of the hospital—the No. 2 administrator—and assistant professor of hospital administration in 1963.

Ivey has served as vice chairman of the Chapel Hill Community Council, is a member of the Chapel Hill Board of Adjustments and is immediate past chairman of the official board of the Aldersgate Methodist Church.

He has been chairman of the board of directors at the N. C. Heart Association and has been chairman of several committees of the N. C. Heart Association, the American Heart Association and the Medical Group Management Association.

Earlier this year he was appointed chairman of a national committee to study the structure and organization of the American Heart Association. He is also chairman of AHA's Committee on Affiliate Relations and Services and a member of the AHA board of directors.

Ivey is married to the former Julia Killingsworth of Sumterville, Ala., and they have three children, Martha, 7, Lentz, 5, and Julian, 3.

He is the son of Mrs. John E. Ivey and the late J. E. Ivey of Auburn, Ala.



Dr. C. Arden Miller, 42, former Medical School Dean at the University of Kansas, has been appointed Vice Chancellor, Health Sciences, of the University of North Carolina at Chapel Hill, it was announced here recently by Chancellor J. Carlyle Sitterson.

Dr. Miller will have administrative responsibility under the Chancellor for the schools in the University's Health Center, including School of Dentistry, School of Medicine, School of Pharmacy, School of Public Health, School of Nursing, the North Carolina Memorial Hospital, and the Health Affairs Library.

An internationally-prominent pediatrician and medical administrator, Dr. Miller also will be a full professor in the University at Chapel Hill.

He was Dean and Provost of the School of Medicine and Medical Center of the University of Kansas from 1960 to 1966 and is at present in London, working in a program with handicapped children under auspices of the Department of Education and Science in England.

He is a native of Shelby, Ohio, a graduate of Oberlin College, and received his M.D. degree at Yale University Medical School in 1948. He has taught and practiced pediatrics in New Haven, in Kansas City, and as Director of the Children's Rehabilitation Unit of the University of Kansas Medical Center. Dr. Miller was named a Markle Scholar in Medical Science in 1955.

He is vice president of the Association of American Medical Colleges during 1966, and is a member of the American Medical Association, the Society for Pediatric Research and other professional organizations. He is author of some 35 articles in professional journals.

He is married to the former Helen Meihack of Mansfield, Ohio, and they have four children, John, 17; Thomas, 15; Helen, 11; and Benjamin, 2.

Charles Luke Powell, a native of Rocky Mount, has been appointed assistant director of the N. C. Medical Foundation.

His office will be in the School of Medicine.

Powell has been with the home office of Jefferson Standard Life Insurance Co. in Greensboro for the last 19 years, most recently as assistant manager of the Processing Division.

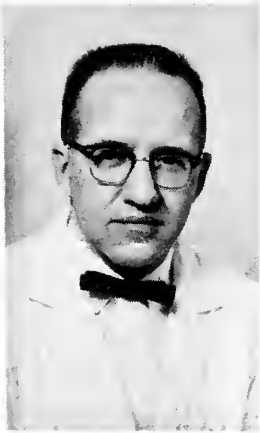
He joined Jefferson Standard in the summer of 1948, immediately after graduating from Davidson College with a degree in physics.

He is the son of Mr. and Mrs. D. B. Powell of 331 S. Grace St. in Rocky Mount and is a 1942 graduate of Rocky Mount High School.

Powell is married to the former Carolyn Wilkerson of 620 N. Spruce St. in Little Rock, Ark. and the late Mr. Wilkerson.

The Powells have four sons, Charles Jr., 20, James 17, Mark, 14, and Robert, 10.





Dr. Colin G. Thomas, Jr. a member of the UNC medical faculty for 14 years, has been appointed chairman of the Department of Surgery.

He becomes the department's second chairman, succeeding Dr. Nathan A. Womack, who has retired from the chairmanship but will continue as Kenan professor of surgery.

Dr. Thomas is a 48-year-old native of Iowa City, Iowa, the son of Dr. and Mrs. C. G. Thomas of Monticello, Iowa.

He completed his undergraduate studies and was awarded his medical degree at the University of Chicago and served his internship and first year of residency in surgery at the University of Iowa Hospital.

He served with the U. S. Army Medical Corps from 1945 to 1947 and immediately resumed his residency training in Iowa City.

He became an associate in surgery at the University of Iowa Medical School in 1950 and was appointed an assistant professor in surgery a year later.

He moved to UNC in 1952 as an assistant professor, was promoted to associate professor three years later and became a full professor in 1961.

The 1962 graduating class at the medical school selected Dr. Thomas for the Professor Award, honoring him as the faculty member "who by his willingness, understanding and ability has contributed most to our medical education."

He is on the editorial board of the Review of Surgery.

He was the senior surgeon on a team which performed the first successful separation of ischiopagus conjoined twins at N. C. Memorial Hospital here in late 1965.

Dr. Thomas has published extensively on his research into thyroid disorders.

He is married to the former Shirley Forbes of Mason City, Iowa, the daughter of Col. and Mrs. Lowell Forbes now of Bradenton, Fla.

Dr. and Mrs. Thomas have four children, Karen, 18, Barbara, 16, Jim, 14, and John, 11.

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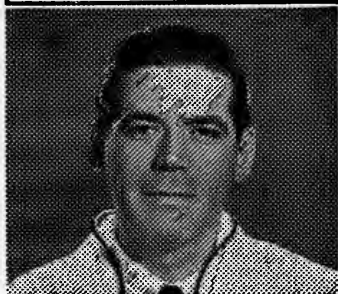
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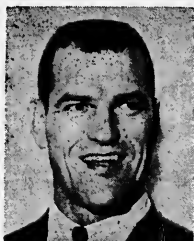
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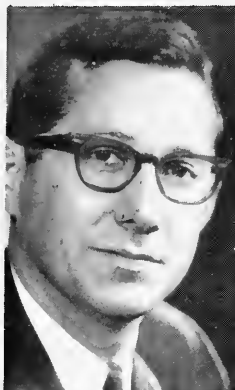
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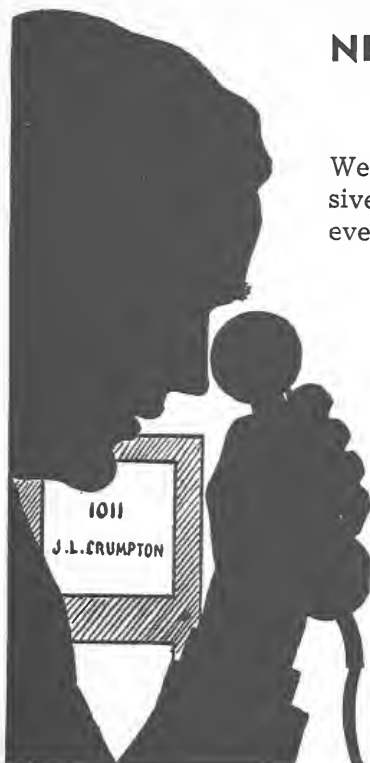
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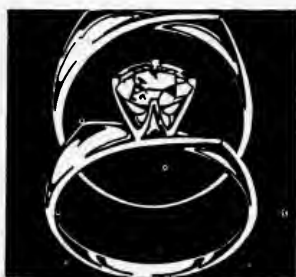
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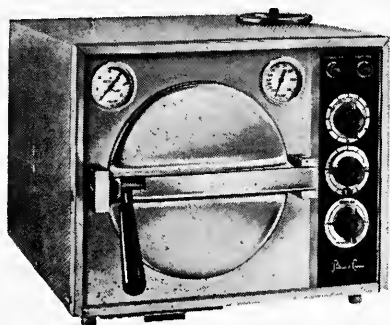
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OF THE UNIVERSITY OF NORTH CAROLINA

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Harry Stephen McGaughey, Jr.

1922-1967

A tribute from the Department of Obstetrics and Gynecology read at a memorial service for Dr. McGaughey on February 27, 1967

Harry Stephen McGaughey, Jr., son of Harry Stephen and Ethel Johnson McGaughey, was born August 8, 1922 in Kenosha, Wisconsin. He received his education to the M.D. degree at the University of Wisconsin. In 1944 he was married to Sarah Marion Hood of Racine, Wisconsin. He was the father of one son and three daughters.

After internship at the Jersey City Medical Center, he had his specialty training at Portsmouth Naval Hospital. In 1954 he terminated his career as a U. S. Naval officer to join the faculty at the University of Virginia School of Medicine. During his tenure at Virginia, he established himself as a physiologist and obstetrician-gynecologist of both local and national renown. His provocative mind and personal warmth will be remembered throughout the lives of his students and colleagues.

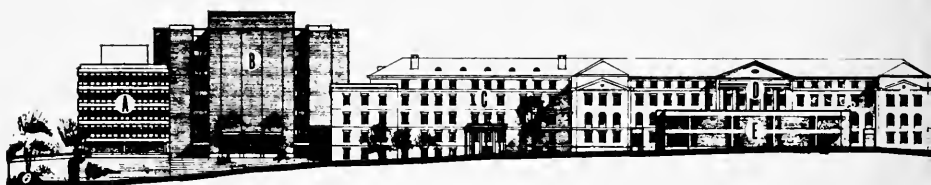
He became known at Virginia as one of the people to whom students and residents could turn with their questions to receive stimulating answers. He would guide their thoughts with sharpness, warmth and humor and somehow, inspire them to answer their own questions as well as others he would raise. Students and house officers were instilled with his spirit of scientific curiosity and were soon not only participating in his endeavors, but working on projects of their own.

His abilities were broad: he lectured extensively in the Department of Physiology as well as Obstetrics. He was recognized nationally by being invited to be a Special Consultant in Reproductive Physiology, serving from 1963 in the National Institutes of Child Health and Human Development Study Section. He was President Elect of the Society for Gynecologic Investigation and Secretary-Treasurer of the Association of Professors of Gynecology and Obstetrics.

In addition to having his feet firmly planted in the demanding areas of research and the care of patients, he was gifted with a rare sense of vision. Up to the last day of his life, he was concerned deeply with the future of maternal and child care in the world and the role that the medical profession should play.

These were the talents that he brought to the University of North Carolina as Department Chairman in December, 1965. In the all-too-brief time he had, he profoundly influenced the Department of Obstetrics into new directions of basic research and social responsibility, while emphasizing the importance of a strong clinical department. Here his visions were being translated into reality.

(Continued on Page 28)



Architect's drawings of new facilities in relation to the MacNider Building (D). A—Elizabeth Scott Carrington Building, School of Nursing. B—Basic science education facility. C—Research Wing (occupied in 1961). E—Division of Health Affairs Library.

FUNDED, UNDER CONSTRUCTION, OR TO BE CONTRACTED

New Division of Health Affairs Facilities

A. SCHOOL OF NURSING

Construction of this building, containing six floors and 70,000 square feet of space, is expected to begin late this summer with occupancy in 1969. It is being financed by a U. S. Public Health Service grant of \$1.1 million matched by \$805,000 appropriated by the 1965 General Assembly.

It is to be named in honor of Mrs. Elizabeth Scott Carrington of Burlington who has served as Chairman of the Nursing Committee of the Medical Foundation since its origin in 1953. This Committee has rendered vital help in the areas of student recruitment, scholarships, and in the procurement of funds for the new building.

A noteworthy feature of the building is that the outer walls and two service cores will furnish the necessary support. Since inner walls will not be supporting, rearrangement of space in accordance with future needs will be facilitated.

It is anticipated that the new structure will house, in addition to faculty and administrative offices, study and classroom space for 300 undergraduate students, 100 graduate students, and 1000 students taking continuation education courses.

B. BASIC SCIENCE EDUCATION FACILITY

According to Dr. William Huffines, Medical School coordinator, this eight story structure containing 127,000 square feet of floor space is currently in the working drawing stage with contracts to be let by late summer and occupancy in 1970. At that time, entering Medical School classes will number 100 members. It will house all of the teaching functions of the basic science departments and new laboratory animal facilities.

In concept, this building is exciting. The medical students will be taught in multi-disciplinary laboratories, i.e., each student will be permanently assigned a low-bench and adjacent high-bench work area, and the various scientific disciplines will come to him. Thus, in his permanent work area, he will study biochemistry, microbiology, pathology, physiology, etc.

It is planned that a laboratory manager and his staff, working with the basic science departments, will supply the student laboratories with equipment each day according to the needs of that day's scheduled work. Plans for the various floors are as follows:

Floor 6—Gross anatomy.

Floor 5—First year medical student's multi-disciplinary laboratories.

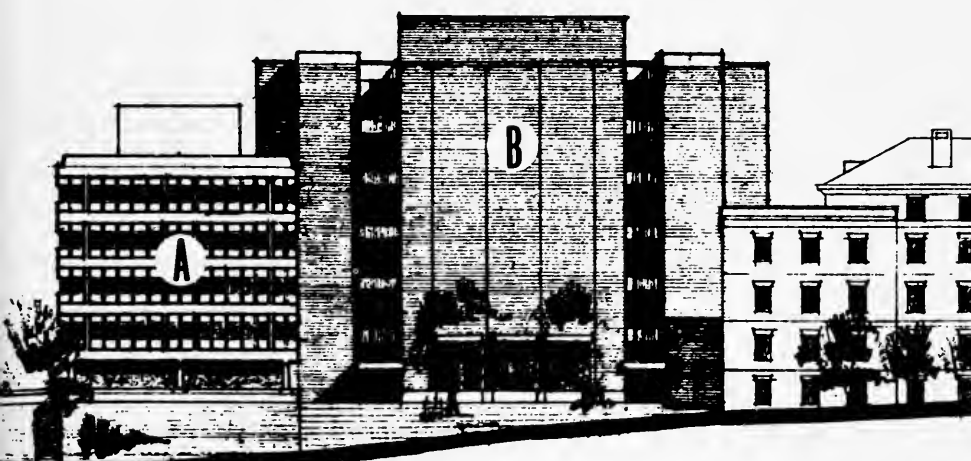
Floor 4—Second year medical student's multi-disciplinary laboratories.

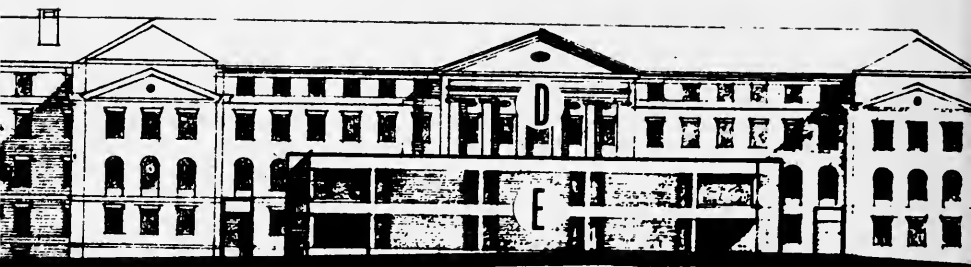
Floor 3—High-bench Laboratories for dental, nursing, physical therapy, and other students.

Floor 2—Low-bench Laboratories for dental, nursing, physical therapy, and other students.

Floor 1—Lounge, dining facility, and lecture rooms.

Basement and sub-basement—New and enlarged laboratory animal facilities.





E. DIVISION OF HEALTH AFFAIRS LIBRARY

The new Division of Health Affairs Library will soon begin construction and is planned to be finished and occupied by 1970. It will be located in the courtyard of the MacNider Building, facing the entrance to the School of Medicine and backed by Pittsboro Street, thus convenient and easily accessible to all the students and faculty of the five schools of the Division of Health Affairs, Medicine, Dentistry, Public Health, Pharmacy, and Nursing, as well as hospital personnel and others. The first stage of the eventual six story building will have only three floors, a total of 45,000 square feet. Stages two and three will come a little later, expanding the library by another 45,000 square feet.

The new library will house a collection of 144,000 volumes and provide seating space for 560 readers, which represents approximately 20% of the faculty and student body in the degree programs. The School of Pharmacy Library seating 80, will remain the only branch of the Library. Upon completion of stages two and three, accommodations will expand for a total of 1,000 readers and 348,000 volumes. The building is designed on a modular system providing flexibility in the relocation of equipment and functions, being colorful, comfortable, and air conditioned throughout.

Upon entering the Library one will see on the right the Circulation Desk. To the left, will be the public catalogs and just beyond, and behind will be the Acquisitions and Catalog Departments. Standing in the commodious corridor, just inside the entrance, the reader will see a double stair and elevator where approaches to the floors above and below are provided. Directly to the right and beyond will be the Reference Reading area with facilities for 80 readers, 5 reference librarians and 4,100 reference volumes. Also located in this area will be Xerox and teletype equipment, pamphlet files, and other resources. To the left will be the Current Periodicals area with provision for 50 readers and over 2,000 journals. A browsing room convenient to the main entrance will provide generously spaced low stacks for 200 non-professional books and periodicals. Semi-lounge chairs for 20 readers should encourage leisure and enrichment reading.

The floor below will be primarily stacks with 240 individual study tables interspersed throughout in small groupings, and a collection of 133,700 volumes of which over 100,000 will be bound periodicals. Also located on this lower floor, the first floor of the library, are four small sound-proofed conference rooms that will accommodate 4 to 6 readers for study and discussion groups.

Staff facilities, library storage, and the Shipping and Bindery Departments are located here, too.

The floor above the main floor and the uppermost floor of the first stage will also house stacks and carrels but is essentially for the Reserve Reading area and the History of Medicine Room. The Reserve Reading area will seat 65 readers in semi-lounge chairs and at small tables for one or two. The History of Medicine Room will contain the few rare books that the Division Library owns, 2,500 bound volumes of the historical collections, and seats for 40 readers. This room will function as a meeting room for medical history clubs, journal clubs, as well as a reading room for users of the historical materials.

The new library building will also provide special facilities for micro-reproduction reading, audio-visual and typing carrels. Shelves will be "open" with few exceptions. There are exhibit areas in the vestibule and entrance corridor. And an expanded library staff will hopefully demonstrate that the Library is not just a monument to the ability of the architects, but an active information service in the progress of knowledge, the helpmate to education, practice and research.

F. AMBULATORY PATIENT CARE FACILITY



The ambulatory patient care facility is shown in the architect's drawing as the first stage of a proposed three stage expansion program of North Carolina Memorial Hospital.

Of the many needs of the University's Health Affairs area, the ambulatory patient care facility, has been given a top priority. It is being financed through state appropriations, Federal funds and private donations, at a total cost of

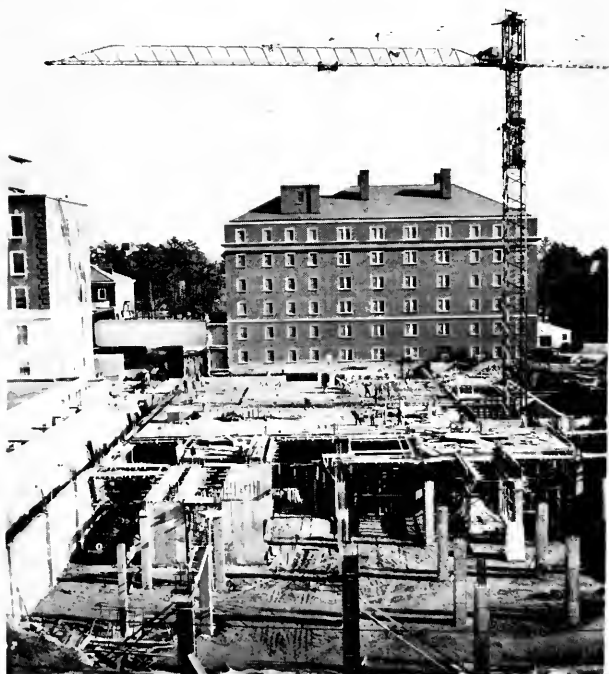
\$10,270,879, including equipment, and will house the J. Spencer Love clinics. The first stage, as shown above in the architect's sketch and in its present state of construction, will have five stories (three above ground level and two below). The total additional gross space in the facility will be 265,000 square feet. It will become the main entrance to the Hospital and will house additions to diagnostic and therapeutic radiology, mechanical space, main public entrance and public spaces, pharmacy, administrative services, out-patient clinics, emergency room with overnight beds, dietary facilities, clinical laboratories, and a Clinical Research Unit.

Also on the south side starting at the Hospital's fourth floor, there will be a four-story addition which will become a connecting link between the existing Hospital and the bed tower (stages two and three). This addition will also provide teaching space for nursing and medical students related to patient care on the in-patient floors.

The ambulatory patient care facility, thus, will house not only clinics but also services for the bed floors of the existing Hospital as well as for the proposed bed tower.

This Facility also includes a three story addition north of the existing Hospital for central sterile supply, physical and occupational therapy, operating rooms, and employee locker rooms.

At the present time, the total out-patient visits per year are approximately 120,000, and the new facility is designed for 150,000-200,000 patient visits per year.



Present status of construction of the ambulatory care facility.



Dr. Carl B. Lyle, Jr.



Dr. Robert Huntley



Dr. W. R. Berryhill

Division of Education and Research in Community Medical Care

CARL B. LYLE, JR., M.D.

Assistant Professor of Medicine and Assistant Director of the Division

In order to more effectively coordinate and expand its interest and activities in and responsibility for improving medical care in the community, the University Medical School established the Division of Education and Research in Community Medical Care in January, 1966 as a branch of the Dean's Office. Fortunately for the success of this undertaking there has been for some time an increasing faculty concern for the Medical School's more active participation in the problems of community medical care, especially among members of the Departments of Medicine, Pediatrics, Preventive Medicine, Psychiatry, and Hospital Administration as well as those of Surgery and Obstetrics, and these have been aided by faculty members from the Departments of Public Health Administration, Epidemiology and Biostatistics from the School of Public Health.

The major objectives of the Division are:

1. To establish effective affiliations with a few carefully selected community hospitals in an effort to develop regional medical educational centers both in larger community hospitals and in the more rural areas. Such affiliations will be designed to
 - a. offer a better medium for continuing education for the physicians of the community by frequent two-way exchanges between the staff of the community hospital, and the School of Medicine;
 - b. develop residency programs for physicians interested in continuing comprehensive medical care for the individual and his family

(family physicians). It is hoped that the changing patterns of medical care in the future can be reflected in the flexibility of these training programs for the family physician, although the essential content will be training in depth in medicine and pediatrics. The development of other types of joint residency programs in community hospitals will be encouraged also;

- c. provide a larger opportunity for the training of health personnel of various types and categories;
 - d. provide elective clerkships for senior medical students who have an interest in community practice;
 - e. develop and strengthen the much needed ties between practicing physicians in the community and the medical faculty.
2. To develop one or more demonstration centers especially in rural areas for experimental or pilot projects in continuing medical care in which interested medical faculty can participate with the community physicians and the community health agencies in the planning and implementation of better methods of delivering medical care in the future and to provide an environment in which medical students and house officers interested in community medicine can have a valuable educational experience.
 3. Provide an opportunity for faculty in the Schools of Medicine and Public Health interested in medical care research and community medical practice to study the disease patterns and medical needs of the community, and offer technical assistance and consultations to community leaders who are involved in planning for improvement of the quality and availability of medical care for their area.
 4. To coordinate and extend the existing educational and research activities of the Medical School—within the state mental hospitals and the state prison in which the Departments of Medicine and Surgery are currently involved.

Since its organization the activities of the Division have been curtailed because of leaves of absence of three of its participants in its activities and planning—Drs. Carl Lyle, Assistant Professor of Medicine, and Robert Huntley, Assistant Professor of Medicine and Preventive Medicine, and Dan A. Martin, Associate Professor of Medicine and Preventive Medicine on continuing leave as consultant to the Trover Clinic in western Kentucky.

Nevertheless, in the past year the following progress toward the goals outlined can be reported:

- A. Drs. Huntley and Lyle have served as Executive Directors to the Health Advisory Committee of the Appalachian Regional Commission until September, 1966 (a group assigned the task of designing programs in comprehensive health care for rural Appalachia).
- B. Initiation of the first step in developing regional educational medical centers through an affiliation with
 1. the *Charlotte Memorial Hospital* in the establishment of

- a. a jointly sponsored third year of residency in internal medicine for senior residents from the North Carolina Memorial Hospital who are interested in entering private practice in the community; and
 - b. providing an elective clinical clerkship in medicine for the senior medical students. The extension of this initial affiliation to involve other educational programs between the services of the two institutions is under consideration.
2. The completion of an affiliation with the *Moses Cone Hospital* in Greensboro initially involving the Departments of Medicine and Pediatrics in the School of Medicine and the Medical and Pediatric Services of the Moses Cone Hospital to develop
- a. teaching services for a jointly sponsored three year residency for family physicians
 - b. to provide elective clerkships for medical students in medicine and pediatrics. Each service will be under the direction of a full time staff member jointly appointed by the two institutions.
- C. The continued development of the Family Care Clinic established three years ago in the Outpatient Department of North Carolina Memorial Hospital by members of the Departments of Preventive Medicine and Medicine led by Dr. Robert Huntley with the participation of students and house officers to provide continuing medical care for a limited number of indigent families in the community.
- When the new outpatient clinic is completed and when adequate funds can be secured for operation, it is hoped to enlarge this clinic in terms of number of families for whom care is provided and add more staff, including the family physicians in the community. This should be a valuable experience for medical students and house officers who are interested in community medical care.
- D. Members of the Division have served as consultants to the Eastern Appalachian Regional Health Council (a council with members from Burke, Caldwell, McDowell, and Alexander Counties) which is attempting to establish a demonstration comprehensive regional health program for that area of the state, aided in part by funds from the Appalachian Redevelopment Act.
- E. Members of the Division have served as consultants for the State of Franklin Health Council (a health planning council for the seven most southwestern counties of the state which is planning the needs for health services and facilities in that region).
- F. Members of the Division have continued to coordinate the endeavors of the University Medical Center at Dorothea Dix State Hospital in the fields of medicine and neurology. This special service in which students

(Continued on Page 28)

NORTH CAROLINA

Chapel Hill NEW RESIDENTS



Robert L. Abney, III, M.D.
Pediatrics
M.D., University of Mississippi



Paul Black, M.D.
Surgery
M.D., Washington University



Robert O. Crawford, Jr., M.D.
Ophthalmology
M.D., Bowman Gray School of Medicine



Takey Crist, M.D.
Obstetrics & Gynecology
M.D., University of North Carolina



John I. Fishburne, Jr., M.D.
Obstetrics & Gynecology
M.D., Medical College of South Carolina



Jorge M. Gonzales, M.D.
Surgery
M.D., Universidad San Marcos, Lima, Peru



Marion W. Griffin, M.D.
Surgery
M.D., University of North Carolina



Chester C. Haworth, Jr., M.D.
Neurology
M.D., Duke University



Charles R. Lamb, Jr., M.D.
Surgery
M.D., Bowman Gray School of Medicine



Thomas K. McClane, M.D.
Psychiatry
M.D., University of Florida



Richard L. Minnihan, M.D.
Psychiatry
M.D., University of Iowa



Thomas L. Presson, M.D.
Surgery
M.D., University of North Carolina



Mack D. Jones, M.D.
Neurology
M.D., Medical College of Georgia



Renato G. G. Terzi, M.D.
Thoracic Surgery
M.D., Faculdade de Medicina,
de Ribeirao Preto



V. A. Wilson, M.D.
Anesthesia
M.D., University of North Carolina

MORIAL HOSPITAL

th Carolina

1966 - 1967



Robert D. Croom, M.D.
Surgery
University of North Carolina



Lawrence M. Culchin, M.D.
Medicine
M.D., University of North Carolina



William F. Eckbert, M.D.
Psychiatry
M.D., Emory University



Doris A. Edwards, M.D.
Psychiatry
M.D., Medical College of South Carolina



Patrick L. Jasper, M.D.
Pediatrics
M.D., Vanderbilt University



Nancy E. Jernigan, M.D.
Psychiatry
M.D., University of North Carolina



John J. Johnson, M.D.
Ophthalmology
M.D., University of Arkansas



Robert T. Kindley, M.D.
Pediatrics
M.D., University of North Carolina



James W. Rose, Jr., M.D.
Medicine
University of North Carolina



Robert Sarape, M.D.
Anesthesia
M.D., University of North Carolina



Timothy H. Smelter, M.D.
Medicine
M.D., College of Physicians and Surgeons



Thomas W. Sowder, M.D.
Psychiatry
M.D., University of Florida

RESIDENTS NOT PICTURED

William G. Bales, M.D.
Obstetrics & Gynecology
M.D., University of North Carolina

Jack C. Childers, M.D.
Orthopedics
M.D., College of Physicians and Surgeons

Lloyd D. Lohr, M.D.
Obstetrics and Gynecology
M.D., University of North Carolina

Billy Lee Carroll, M.D.
Neurosurgery
M.D., University of North Carolina

Clarence J. Edens, M.D.
Psychiatry
M.D., Emory University

Bruce A. Cohn, M.D.
Dermatology
M.D., University of California

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5th	411.00	67.25	343.75
10th	411.00	94.25	316.75
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Date of Birth _____

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The Class of 1957

F. NORMAN BOWLES, JR., 2925 Paces Lake Court, N.W., Atlanta, Georgia 30327. Does pathology in association with Dr. Carl Biggers, U.N.C. Med '58, and two other physicians. Postgraduate work was accomplished at Grady Hospital, Atlanta, Georgia. He is a member of the Civitan Club and a member of the Board of Directors, Cobb County Unit, American Cancer Society.

JAMES H. BURRUS, Women's Clinic, P. O. Box 1248, Shelby, N. C. 28150. He has a partnership practice in Ob-Gyn with Dr. Charles Lamp-ley. He and his wife, Sikes, have three children: Chip, 10; Alan, 7; and Eric, 4. Hunting and gun collecting are of special interest for leisure hours. Military service was with the U. S. Army in Wurzburg, Germany.

JAMES R. CLAPP, Assistant Professor of Medicine, Duke University Medical Center, Durham, N. C. 27700. Does internal medicine. Postgraduate training was done at Parkland Hospital, Dallas, Texas and with the Kidney and Electrolyte Section at the National Heart Institute. He is an "Established Investigator" of the American Heart Association. He and his wife, Janet, have two sons: Bobby, 8; and Tommy, 6.

ROBERT S. CLINE, 205 Hillcrest Drive, Sanford, N. C. 27330. Is associated with two other physicians in the Sanford Medical Group, 409 Carthage Street in Sanford. Did an internship at Roper Hospital, Charles-

ton, S. C. and was a medical resident at the Medical College Hospital, also in Charleston, S. C.

He and his wife, the former Martha Yount, have three children: Dara Louise, 9; Phillip Edmond, 8; and Mark Noel, 3. He is a member of the Church Council (Deacon) of Sanford's Trinity Lutheran Church. Recreational activities include philately, hunting and fishing.

LUTHER HALL CLONTZ, Box 139, Broughton Hospital, Morganton, N. C. 28655. He is Director of the Diagnostic Clinic, Western Carolina Center, Morganton, N. C. Enjoys teaching 15 and 16 year old boys at Calvary Baptist Church. He and his wife, Ruth, have three children: Geoffrey, 10; Deborah, 8; and Dana, 5. For recreation, he enjoys refinishing furniture and rebuilding antique cars.

JOEL D. CONNER, 2608 Armstrong Park Road, Gastonia, N. C. 28052. Internship in Charleston, S. C. and residency in Augusta, Ga. Does solo practice in Ob-Gyn. He and his wife, Nancy Peck, have three children, Joel, Jr., 9; Mike, 7; and Debbie, 4. He served as Chairman Ob-Gyn, 1964; secretary of the Surgical Staff, 1965 and secretary general staff, 1966.

He sings in the First Methodist Church choir and is a member of the Jaycees. Received the Jaycee Spoke Award in 1964. Golfs occasionally when time permits.

GORDON C. CROWELL, 816 South Aspen Street, Lincolnton, N. C. 28092. He is in internal medicine—solo practice. Postgraduate training was done at Grady Memorial Hospital in Atlanta, Ga. He was certified by the American Board of Internal Medicine in February 1964. Civic and church activities include the Kiwanis Club and First Methodist Church.

He and his wife, Frances, have two sons and one daughter, Thomas Gordon, 10; Carolyn Ann, 8; and William Rodgers, 4.

GEORGE S. EDWARDS, 231 Bryan Building, Raleigh, N. C. 27605. Has a private practice in orthopaedic surgery. Postgraduate training was done at North Carolina Memorial Hospital. He and his wife, Kathy, have four children, George, Jr., 15; Nancy, 14; Elizabeth, 12; and Banks, 1½.

T. ALBERT FARMER, JR., University of Alabama Medical Center, Birmingham, Ala. 35200. He is Assistant Dean for Curriculum Affairs and Assistant Professor of Medicine, University of Alabama Medical Center. Postgraduate training was also done at the University of Alabama Medical Center. He is a Diplomate of the American Board of Internal Medicine and an Associate of the American College of Physicians and the American Federation for Clinical Research.

He and his wife, the former Nancy Nussear (UNC School of Nursing, Class of 1958), have four children, Tommy, 8; David, 7; Steven, 4; and Kelly, 2.

LIEUTENANT COMMANDER JAMES W. FRESH, Medical Corps, U. S. Navy, Pathology Department, NAMRU-2, Box 14, A.P.O., San

Francisco, California 96263. Does pathology. Postgraduate training was done at N. C. Memorial Hospital and U. S. Naval Hospital, St. Albans, New York. Received an award while in Vietnam in 1964. He and his wife, Frances, have two children: Alexander, 7; and Elinore, 4. For recreation he enjoys boating, sailing, fishing and photography. Abroad when this information was received, Jim visited Honolulu in 1965, Manila in 1965 and 1966, Vietnam in 1964, 1965, 1966, Docca 1966, and Bankok, 1964, 1965, 1966.

STEPHEN T. GUPTON, JR., 812 Rosemont Avenue, Raleigh, N. C. 27600. Postgraduate training was done at N. C. Memorial Hospital, Chapel Hill. Presently he is in Neurology at Dorothea Dix Hospital, Raleigh, N. C. He and his wife, Helen, have four children, Deborah, 8; Diane, 7; Stephen, III, 5; and Cathy, 3. He enjoys fishing when time and weather permit.

BENNETT ALLEN HAYES, JR., 1643 Owen Drive, Fayetteville, N. C. 28301. Has a solo Ob-Gyn practice. Did his postgraduate work at University of Arkansas Medical Center, Little Rock, Arkansas. He has served as secretary of the Cumberland County Medical Society and Chief of Ob-Gyn at Cape Fear Valley Hospital, Fayetteville, N. C. He and Mary Evelyn have three children: Jim, 8; Dick, 7; and Jonathan, 3.

J. PAUL HURST, JR., 201 Abington Memorial Hospital, Professional Building, Abington, Pennsylvania, 19001. Private practice in psychiatry. He is an instructor in psychiatry at Temple University Medical School; and a student in the Philadelphia Psychoanalytic Institute. Postgraduate

training was done at Temple University Hospital for two years and at Langley Porter Clinic for a year.

For recreational activities he enjoys the study of Spanish language. While he was associated with the U.S.A.F. he was stationed in Spain. He and his wife, Theresa, have two daughters, Licia, 4; and Karen, 2.

RICHARD VERNON LILES, JR., Box 676, Norwood, N. C. 28128. Is in general practice—solo. Postgraduate training was done at the University of Alabama Hospital, Birmingham. He and his wife, Ann Abbey, have one son, Gregg Rutledge, one year old.

He enjoys golf, hunting and boating for recreation. He is a deacon in the Presbyterian Church in Norwood and is a Director of the Jaycees.

He served in the U. S. Navy and was in Japan 1959-1961. In April, 1965, he attended an A.A.G.P. meeting in San Francisco.

GERALD T. McMAHON, 121 East Aspen, Flagstaff, Arizona 86001. Has a solo practice in Ob-Gyn. Did postgraduate work at Parkland Hospital, Southwestern Medical School, Dallas, Texas. He and his wife, Patricia, have five children: Rob, 10; Leslie, 9; Cait, 7; Margaret, 6; and Jay, 6. His chief recreational activity is skiing (just 12 miles from town).

HUGH MAXWELL MORRISON, JR., Pinehurst Medical Center, Pinehurst, N. C. 28374. Does solo practice in ophthalmology. Internship was done at University of Alabama in Birmingham and a residency in ophthalmology at N. C. Memorial Hospital. He is a Fellow of the American Academy of Ophthalmology and Otolaryngology, also a Diplomate of the

American Board of Ophthalmology and is Secretary-Treasurer of the Moore County Medical Society.

He is a Deacon at the Brownson Memorial Presbyterian Church in Southern Pines, and is a member of the Kiwanis Club and Elks Club. Recreational activities include golf, tennis, hunting and home work shop.

He and his wife, Myrtis, have two children, Mary Anne, 5; and Elizabeth, 3.

STEPHEN C. PUGH, 316 South Dyer Street, Elizabeth City, N. C. 27909. Does general practice in partnership with Dr. Robert Poston. Did postgraduate work at Watts Hospital, Durham. He and his wife, Mable, have three children: Cathy, 8; Allison, 6; and Stephanie, 4. Horse racing is his chief recreational interest.

HENRY J. RITCHIE, 31 Patton Avenue, Concord, N. C. 28025. Postgraduate training was done at the Medical College of South Carolina. Is in general practice. He and his wife, Margaret, have two children, Jack, Jr., 6; and John, 4.

IRL T. SELL, III, 1313 North 2nd Street, Phoenix, Arizona, 85000. Does Anesthesiology with a group. He interned at Letterman General Hospital in San Francisco and performed a residency at Walter Reed Hospital for two years. He was certified by the American Board of Anesthesiology in 1962. He and his wife Marjorie, have five children, "Ty", 14; Mark, 11; "Geff", 8; Nancy, 6; and David, 4.

He is a member of the First Methodist Church in Phoenix. For recreation he enjoys hunting, fishing and work with Boy Scouts. Military

service was in the U. S. Army—1956 until 1965. He was assigned to NASA Project Mercury (medical recovery) and made trips to Japan, Okinawa and Alaska.

NATHANIEL L. SPARROW, 1300 St. Mary's Street, Raleigh, N. C. 27605. Has a solo practice in otolaryngology. Postgraduate training was done at University of Minnesota Hospital, Minneapolis, Minnesota. He became a Diplomat of the American Board of Otolaryngology in 1965.

GERALD M. WAGGER, 8815 Stonehaven Road, Randallstown, Maryland, 21133. He is an instructor in the Department of Medicine, Division of Gastronomy, University of Maryland School of Medicine. Post-

graduate training was done at the University Hospital in Baltimore.

He and his wife, Barbara, have two daughters and a son, Debra J., 7; Susan E., 5; and David L., 3½.

For recreation he enjoys fishing.

BENSON R. WILCOX—see article page 26.

DAVID A. WILLIAMS, Laurinburg, N. C. 28352. Postgraduate training was done at Watts Hospital in Durham. He is in general practice in Laurinburg. He and his wife, Anne, have three boys, Mac, 12; Joe, 10; and John, 8.

Club and church activities include the Rotary Club and the Laurinburg Presbyterian Church, where he serves as a deacon. Golf is his favorite sport.



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Presenting the Faculty



Dr. Ben R. Wilcox, assistant professor of surgery at the UNC School of Medicine, is one of 25 young medical scientists appointed as 1967 Markle Scholars in Academic Medicine by the John and Mary R. Markle Foundation of New York.

Wilcox, who becomes 35 in late May, joined the UNC medical faculty as an instructor in 1964, immediately after completing a residency in surgery at N. C. Memorial Hospital.

The Markle Foundation pays \$30,000—at the rate of \$6,000 each year for five years—to the medical school at which each of its Scholars is teaching, engaged in administration or conducting research.

The payment is to be used to supplement salary, aid research or otherwise assist in the development of the Scholar as a teacher or investigator.

Dr. Wilcox is the 12th Markle Scholar at UNC.

He is a native of Charlotte, the son of the late Mr. and Mrs. James S. Wilcox, and is married to the former Lucinda Holderness, daughter of Mr. and Mrs. Howard Holderness of Greensboro.

Dr. Wilcox is a history graduate of UNC (1953) and was awarded his medical degree by his alma mater four years later.

He served an internship in surgery and was an assistant resident in surgery at Barnes Hospital in St. Louis, Mo., before returning to Chapel Hill in 1959 to continue his residency training at N. C. Memorial Hospital.

From 1960 to 1962 he was a clinical associate at the National Heart Institute in Bethesda, Md.

His special research interest is in cardiopulmonary physiology, with emphasis on pulmonary circulation.

In addition to his academic and medical achievements, he is a former Southeastern Conference swimming champion (1950) and the winner (also in 1950) of the Tennessee State Oratory Contest.



Dr. Frank C. Wilson Jr., an orthopedic surgeon on the UNC medical faculty for three years, was one of 25 young medical scientists in the U. S. and Canada selected as 1966 Markle Scholars in Academic Medicine.

The John and Mary R. Markle Foundation of New York City will pay \$6,000 a year for five years to the medical school to supplement the Markle Scholar's salary, to assist him in his research and to otherwise help him develop as a teacher or investigator.

Dr. Wilson is a 37-year-old native of Rome, Ga., completed his undergraduate studies at Vanderbilt University and earned his medical degree in 1954 from the Medical College of Georgia.

He served an internship in surgery at Grady Memorial Hospital in Atlanta before going to Presbyterian Hospital in New York City for an assistant residency in general surgery.

He remained in the Columbia-Presbyterian Medical Center from 1960 to 1964 as resident and then as senior Annie C. Kane Fellow in orthopedic surgery at the New York Orthopedic Hospital. He served as an instructor in orthopedic surgery at the College of Physicians and Surgeons in 1963.

Between his internship and residency, he spent two years in the U. S. Navy.

Dr. Wilson came to Chapel Hill in January, 1964, as an instructor in surgery (orthopedics) and attending orthopedist at N. C. Memorial Hospital. He became an assistant professor in 1965 and has become a consulting orthopedist for Watts Hospital in Durham.

In addition to his academic and medical achievements, he is a former Southeastern Conference swimming champion (1950) and the winner (also in 1950) of the Tennessee State Oratory Contest.

Dr. Wilson's major research interests are in the fields of arthritis, bone and joint infections, and children's deformities.

He has been successful with knee arthroplasty, a procedure in which diseased knee joints are removed and replaced with metal joints.

He has been the author of a monthly column, "The Hidden Injury," for the "Resident Physician" magazine.

—Dr. McGaughey—

(Continued from Page 9)

Here his research was re-established and will continue. Here, also, he began to express his concern over the obstetrician's role in our society in such areas as a broad program for maternal and child care, continuing education of those professions associated with maternal care, and a larger view of the world-wide implications of the reproductive process.

Those of us who worked with him will sense the loss of consultation, inspiration and vision. His unending good humor, patience, and warmth will also be missed. He served, and will continue to serve, as a guide to our professional lives: let us hope that his lasting memorial will be in the dedication he imparted to us in his chosen field.

Chapel Hill, North Carolina
February 27, 1967



—Education and Research—

(Continued from Page 17)

and residents have experience in the medical and neurological problems of the very large mental institution population is in its fourth year of operation.

More recently the Division has received a grant from the Regional Health Programs of North Carolina (Heart Disease, Cancer and Stroke legislation) to assist in further planning for such programs as presented above.

There is an Advisory Committee composed of representatives from the departments in the School of Medicine and the School of Public Health concerned with community medical care, the State Health Department, the Institute of Government, Medical-Sociology, and the part-time clinical faculty in Pediatrics, Internal Medicine, and Family Practice.

The present staff is small (Drs. Robert Huntley, Carl Lyle (Assistant Director), W. R. Berryhill (Director) and none is able to give full time to the Division activities. Funding is limited. However, it is hoped that the alumni will communicate with the Division members concerning their ideas, philosophies, and suggestions which will develop a mutually helpful relationship between the University Medical School and the communities of the state in education and research in community medical care.



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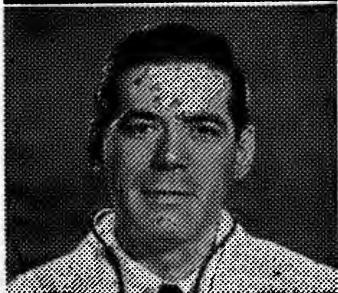
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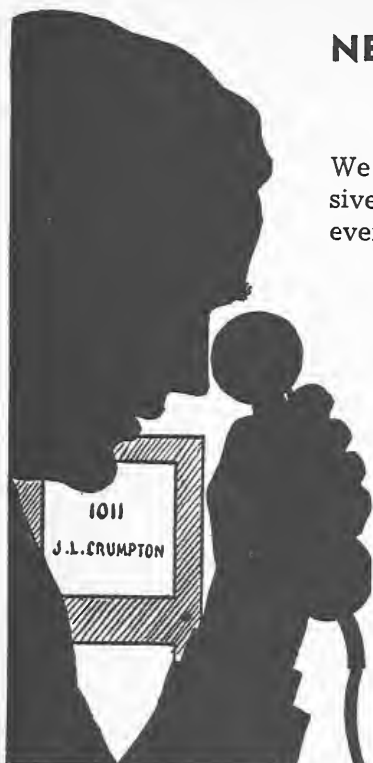
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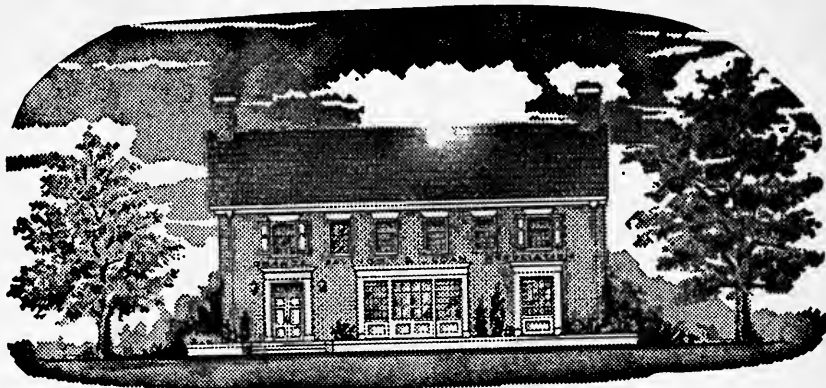
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Vol. XIV

May, 1967

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A Message from the Dean

This commencement issue of the Bulletin offers an appropriate opportunity to review the year of this School. There have been major developments in every area. The greatest blow, of course, was the tragic death of Dr. Harry S. McGaughey, who in just over a year as Chairman of the Department of Obstetrics and Gynecology, was bringing that Department to a new era of contribution to the School and to the State. Dr. McGaughey's successor is now being sought.

The curriculum review has moved forward under the direction of Dr. David Hawkins and the initial phase, appraisal of the present effort, nears completion. Now we shall make the hard decisions involved in formulating changes in curricular content and form. This we expect to complete during the next academic year.

Last fall Mr. Eugene B. Crawford, Jr. left us after 15 years as Associate Director and Director of the North Carolina Memorial Hospital to assume the position of Executive Director of the Wilmington Medical Center in Wilmington, Delaware. Former Associate Director, Mr. William L. Ivey, has succeeded Mr. Crawford and is making progress with an extensive plan to reorganize the hospital to provide improved patient services and a better educational environment.

1966-67 has seen important developments in the building program of the Medical Center. The Ambulant Patient Facility, construction of which commenced in May 1966, is about one-third of the way to completion. Plans are advancing for the Child Development Center and the Basic Science addition. It has been necessary to reduce the size of these two buildings because of increased building cost, but in their present limited scope funding is complete and construction on the Basic Science addition will begin this summer.

Under the competent direction of Dr. C. C. Fordham, III, the Admissions Committee has continued its outstanding work. In September 1967 we shall welcome the class of 1971, our largest entering class, 75 strong. The high quality of applications this year made admissions especially competitive and we were fortunate to be able to accept five additional students. The increased competitiveness of the admissions situation underlines the importance of our plans to increase Medical School size to 100 students by 1970.

In December 1966 Dr. Nathan A. Womack, as Chairman since 1951, the founder of our Department of Surgery, was succeeded by Dr. Colin G. Thomas who joined the faculty in 1952 and has successively served as Assistant Professor, Associate Professor and Professor of Surgery. It is unnecessary to detail and impossible adequately to describe Dr. Womack's immense contribution to the University and the State. He continues in active service as Kenan Professor of Surgery.

Intensive efforts have been made during the year in extending the reach of the Medical School to the people of North Carolina. The Division for Education and Research in Community Medical Care has completed affiliations with the

Charlotte Memorial Hospital and the Moses H. Cone Memorial Hospital in Greensboro. The senior resident in medicine at Charlotte Memorial is on assignment from the North Carolina Memorial Hospital and some senior medical students have had their clerkships there this year. Teaching services in medicine and pediatrics have been established at the Moses H. Cone Hospital under the direction of Dr. William Herring and Dr. Martha Sharpless respectively. Senior students will have the option of electing clerkships in the Greensboro institution next year and it is expected that a house officer program for training in family medicine will be established in 1968. The Community Care Division has in addition been working with community groups all across the State.

At this writing the Medical Center's budgetary requests for 1967-69 are under consideration in the General Assembly. The outcome is crucial, since the ability of the Medical School to expand its programs, to preserve quality while meeting increased commitments to contribute to the care of the people of the State hang heavily upon the appropriations for the coming biennium. We need new faculty members and operating funds and we need support to proceed with our building program. For many years shortage of space has been the limiting factor in the work of the School and despite trailers and despite the construction now underway still more facilities must be provided.

The seventy-four members of the class of '67 who will receive their degrees in June have the congratulations and good wishes of the faculty and alumni as they go on to the next phase of their careers. Members of the class have exercised unusual leadership in the affairs of the School and have earned our thanks for a notable contribution. We hope that as alumni they continue their connection with the School. We would like to think these graduates will be working with their School throughout their careers.

Isaac M. Taylor, M.D.
Dean
School of Medicine
University of North Carolina



FINAL INSTALLMENT—The third and final installment of \$10,000 was paid recently to the University of North Carolina School of Medicine for a major curriculum study now in progress. The National Fund for Medical Education in New York is providing \$30,000 under a developmental and special purpose grant to help finance the curriculum appraisal. A \$10,000 check was presented to Dr. Isaac M. Taylor, dean of the UNC medical school, in Winston-Salem by Bowman Gray, chairman of R. J. Reynolds Tobacco Co. The company is the largest contributor in North Carolina to the National Fund for Medical Education.

Medical Alumni Officers

1967-1968



Shown to the left is Dr. H. McLeod Riggins, 1922, who became President of the Medical Alumni Association at their annual meeting on April 20th.

Other officers elected were: Vice-President, Dr. William W. McLendon, '46; Secretary, Dr. G. Reginald Tucker, Jr., '55; and Councillors, Dr. Ernest H. Yelton, '41, Dr. Harold L. Godwin, '45, and Dr. Isaac C. Wright, '43M.





Shown above with Dr. Isaac M. Taylor, Dean of the Medical School and Dr. W. Reece Berryhill, Dean-Emeritus (third row right) are the Past Presidents of the Medical Alumni Association, who were presented certificates of appreciation for their services in heading the alumni organization. Shown from left to right first row are: Drs. William R. Stanford, 1958-59; John S. Rhodes, 1960-61; Isaac V. Manly, 1963-64; Verne H. Blackwelder, 1955-56; Frederick C. Hubbard, 1954-55; Second row Hugh A. McAllister, Sr., 1961-62; Milton S. Clark, 1957-58; John F. Lynch, 1965-66; Thomas G. Thurston, II, 1964-65; third row George L. Carrington, 1944-47, and John R. Chambliss, 1966-67.

Not present were: Drs. Karl B. Pace, Sr. 1941-42; Corbett E. Howard, 1942-43; Arthur H. London, Jr., 1947-48; Shashane R. Taylor, Sr., 1948-50; Claiborne T. Smith, Sr., 1950-51; Roy B. McKnight, 1952-53; Merle D. Bonner, 1953-54; Kenneth B. Geddie, 1959-60; Harry L. Brockmann, 1962-63.

Shown below (left to right) are: President Elect, Dr. James Davis, 1942; Dean Isaac Taylor, M.D. and Dr. John R. Chambliss, M1943 outgoing President.



THE CLASS OF 1967

HANS JOACHIM ARNDT: Hans is 26 and is a native of Berlin, Germany. He graduated from the Free University of Berlin in 1963. He took a one year fellowship at Duke University School of Medicine in 1963-1964; he transferred to the University of North Carolina



School of Medicine as a second year student in 1964. He is married to Erika Matthey of Berlin, Germany. Hans will do a rotating internship at Watts Hospital in Durham, North Carolina, and he plans a residency in psychiatry. He plans to go into academic medicine.

PHILLIP GORDON ARNOLD: P.G. is 25 and is a native of Spruce Pine, North Carolina. In 1962, P. G. earned the Bachelor of Science degree in Pre-Medicine Science from Davidson College. He is married to the former Susan Bon Durant of South Bend, Indiana. P. G. will remain at North Carolina Memorial Hospital to do a straight surgery internship. He plans a residency in surgery.



FREDERICK DA COSTA AUSTIN, III: Fred is 25 and is from Charlotte, North Carolina. He attended Davidson College and graduated in 1963 with the Bachelor of Science degree in Pre-Medicine Science. Fred will take a straight medicine internship at Eugene Talmadge Memorial Hospital in Augusta, Georgia. He plans a residency in internal medicine with a special interest in endocrinology. He eventually plans to practice in Charlotte, North Carolina.



GEORGE R. AVANT: George is 25 and comes from Forest City, North Carolina. In 1963 he graduated from the University of North Carolina where he earned the Bachelor of Science degree in Chemistry. George will do a straight medicine internship at Vanderbilt Hospital in



Nashville, Tennessee. His future plans call for a residency in internal medicine.

FRANK WALTON AVERY: Walt is 27 and comes from Winston-Salem, N. C. He graduated from the University of North Carolina in 1962 with a Bachelor of Arts degree in English. He took a year of pathology research between his third and fourth years in medical school. He and his wife, Mary Ann who is from Elkin, N. C., will go to Seattle, Washington where Walt will do a pathology internship. After a pathology residency, Walt plans to go into private practice.



RUDY W. BARKER: Rudy, from Chapel Hill, North Carolina, is 27. He attended the University of North Carolina and earned the B.S. degree in Pharmacy in 1962. His wife, Beverly, formerly Beverly Thompson, is also from Chapel Hill. Rudy will take a rotating internship at Watts Hospital in Durham, North Carolina. He plans to do a residency in family practice and plans a practice in North Carolina.



GERALD WAYNE BLAKE: Gerald is 24, and is from Jacksonville, N. C. He is a graduate of the University of North Carolina where he received a B.S. degree in Medicine in 1964. During medical school, Gerald was elected vice-president of the Student Body his third year and was also president of AOA. Gerald and his wife Mittie, will stay in Chapel Hill where he will do an internship in Medicine at North Carolina Memorial Hospital.



GEORGE GRIFFITH BONHAM:



Butch, who is 25, graduated from Duke University in 1963; he was awarded the Bachelor of Arts degree in Psychology. He and his wife, Susan, formerly Susan Thorpe of Winston-Salem, North Carolina, will be going to Charlottesville,

Virginia, where Butch will do a rotating internship at the University of Virginia. He plans a residency in preparation for a family practice.

THOMAS WILLIAM BUNDY: Tom comes from High Point, North Carolina and is 25. He attended the University of North Carolina, receiving the Bachelor of Science degree in Medicine in 1964. Tom will be going to Danville, Pennsylvania, where he will do a rotating internship at Geisinger Medical Center. After at least one year of residency, he plans to go into general practice in North Carolina.



JOE MIESHELE CARTER: Joe is 28 and comes from Kannapolis, North Carolina. He graduated from Wake Forest College in 1960 with a B.S. degree in Biology. He earned the M.S.P.H. degree in Parasitology in 1961 from the University of North Carolina. He and his wife, Joyce, have a daughter,



Marshele. Joe will remain at North Carolina Memorial Hospital to do a surgery internship and plans to specialize in general surgery.

CHARLES LEE CLARKE, JR.: Chuck is 26 and comes from Goldsboro, North Carolina. He attended the University of North Carolina and graduated in 1963 with the Bachelor of Arts degree in English. He and his wife, Karen, formerly Karen Spangler of Rockingham, North Carolina, will be going to Seattle, Washington where Chuck will do a rotating internship at the University of Washington Hospital. Chuck plans a residency and private practice in OB-GYN.



JOE MALCOLM CRAVER: Joe is 26 and his home is in Shelby, N. C. He attended the University of N. C., receiving a degree in Political Science in 1963. During medical school Joe was awarded a Price Heusner Award; was Secretary-Treasurer of the Senior Class; and had a research project selected to be presented at the Student Medical Research Forum in Galveston, Texas. Joe, with his wife Beth, also from Shelby, N. C., will be moving to Cleveland, Ohio where he will do a straight surgery internship at University Hospitals of Cleveland. He plans to complete his residency in surgery there.



JOHN LAUHLIN CURRIE: John, 24, hails from Carthage, N. C. He received a B.S. degree in Medicine from UNC in 1964. John plans to be married June 8 to Madeline Gray from Charlotte, N. C. He will do a surgery internship at the University of Pennsylvania Hospital in Philadelphia, Pa.



VARTAN AMBAR DAVIDIAN, JR.:



Vartan, a native of Smithfield, North Carolina, is 31. He is a 1958 graduate of the University of North Carolina with a degree in Zoology. He and his wife, Nancy, formerly Nancy McConnell from Delmar, New York, will be staying

in Chapel Hill for his internship in surgery at North Carolina Memorial Hospital. Vartan plans a future in general surgery.

WELDON AARON DUNLAP:

Weldon is 27 and comes from Asheboro, North Carolina. In 1962 he graduated from the University of North Carolina with a Bachelor of Arts degree in Chemistry. He will do a surgery internship at Jackson Memorial Hospital in Miami, Florida, and although future plans now are uncertain, he plans a speciality in surgery.



CHARLES ALLAN EURE:



Allan, 26, is from Roderco, North Carolina. A graduate of the University of North Carolina in 1963, he was awarded the Bachelor of Arts degree in Chemistry. During his freshman and sophomore years in Medical School, Allan was president of

his class. Allan will take a rotating internship at the University Hospital, Hillman Clinic in Birmingham, Alabama. He plans to enter the Armed Services after internship and is undecided about specialty training.

DAVID ARNOLD EVANS:

Dave is 28 and comes from Rich Square, North Carolina. Dave attended the University of North Carolina and graduated in 1963 with an A.B. degree in Chemistry. He is married to the former Lona Batten from Rocky Mount, North Carolina. Dave will do a rotating internship at Watts Hospital in Durham,



North Carolina, and he is planning to do a residency in OB-GYN.

MELVIN WAYNE FLYE:



Wayne hails from Tarboro, North Carolina and is 24. He attended the University of North Carolina and earned the B.S. degree in Medicine in 1964. He served on the Honor Council in his junior year in Medical School. His wife, Phyllis Webb Flye, is also

from Tarboro, N. C. Wayne will do a straight surgery internship at University Hospitals of Cleveland, Cleveland, Ohio. He plans an academic career in either thoracic or plastic surgery.

ROBERT DONALD GARRISON:

Don is from Hayesville, North Carolina and is 26. He attended the University of North Carolina and received the B.S. degree in Medicine in 1964. He and his wife, Margaret, will go to Gainesville, Florida where Don will do a straight pediatrics internship at William A. Shands Hospital, University of Florida. He plans a residency in pediatrics.



JERRY WAYNE GREENE:



Jerry is 25 and is a native of Winston-Salem, N. C. He is a 1963 graduate from the University of N. C. where he received an A.B. degree in Germanics. Jerry will be doing a rotating internship at University Hospital, Hillman Clinic in Birmingham,

Ala. He plans to continue his residency in Internal Medicine.

ORMOND DREW GRICE:

Drew, 26, is from Warsaw, N. C. He graduated with a B.A. degree in Chemistry from UNC in 1963. He is married to Anne from Magnolia, N. C. Drew will remain at N. C. Memorial Hospital in Chapel Hill for a surgery internship. His future plans will be a general surgery residency and then private practice or academic surgery.



ROBERT VERNON HALE: Bob is 26 and is a native of Fayetteville, North Carolina. He graduated from the University of North Carolina in 1963 with a Bachelor of Arts degree in English. Bob will be going to Memphis, Tennessee, where he will do a straight medicine internship at the Baptist Memorial Hospital. Bob plans a future in Ophthalmology.



LINDA GALE HALL: Linda is 25 and hails from Asheville, North Carolina. She graduated from Berea College in Kentucky in 1963 with an A.B. degree in Biology. Linda served as secretary-treasurer of the junior class during medical school. Linda will do a pediatrics internship at St. Christopher's Hospital in Philadelphia, Pennsylvania. She plans to go into either pediatrics or pediatric psychiatry.



HARVEY JAMES HAMRICK: Harvey is from Rutherfordton, North Carolina and is 26. In 1961 Harvey graduated from the University of North Carolina with an A.B. degree in English. He is the president of the senior medical class of 1967. Harvey and his wife, Kermit, from



Advance, North Carolina, will be staying in Chapel Hill as Harvey will do a pediatrics internship at North Carolina Memorial Hospital. Harvey plans a future pediatric practice in North Carolina.

ELZIE FRANKLIN HART, JR.: Frank, 24, is from Burlington, North Carolina. In 1964, Frank received the Bachelor of Science degree in Medicine from the University of North Carolina. He has been a member of the Phi Chi Medical Fraternity while a medical student. Frank and his future wife, Nancy



L. Ward from Asheboro, North Carolina, will be going to Lexington, Ky. where Frank will do a rotating internship at the University of Kentucky Hospital.

JOHN WARD HOLLIFIELD: John, 25, is from Lenoir, North Carolina. He was graduated from the University of North Carolina in 1963 with an A.B. degree in Chemistry. During his sophomore year in Medical School, John served as class vice president. He will be going to Nashville, Tennessee where he will do a straight medicine internship. John has plans for a medicine residency, a fellowship in endocrinology and a future practice in endocrinology and metabolism.



HOWARD DAVID HOMESLEY: Howard hails from Cherryville, North Carolina and is 26. A graduate of the University of North Carolina in 1963, he earned the Bachelor of Arts degree in English. Howard and his wife, Jane who is from Cherryville, N. C., will be going to Nashville, Tennessee where Howard will intern at Vanderbilt Hospital in surgery. He plans a specialty in either surgery or OB-GYN, with a possible future in academic medicine.



LATTIE FULLER HONEYCUTT: Fuller is 24 and comes from Raleigh, North Carolina. He received the B.S. degree in Medicine from the University of North Carolina in 1964. Since entering Medical School, Fuller has served as intramural manager. He and his wife, Wendy, also from Raleigh, N. C., will be going to Nashville, Tennessee as Fuller will take a straight medicine internship at Vanderbilt University Hospital. Fuller plans a residency in radiology.



THOMAS RUFFIN HOOD: Ruffin is from Dunn, North Carolina, and he is 25. He attended the University of North Carolina and was awarded the Bachelor of Arts degree in Psychology in 1963. Ruffin will take a straight surgery internship at the University of Kentucky Hospital in Lexington, Kentucky. His future plans are for a residency in surgery and a private practice in surgery.



ALLEN WILLIAM HUFFMAN, JR.: Allen, 24, is from Hickory, North Carolina. In 1964, he received the B.S. degree in Medicine from the University of North Carolina. Allen and his wife, Barry, formerly of Sanford, North Carolina, will be going to Gainesville, Florida, where Allen will take a medicine internship at the William A. Shands Hospital, University of Florida. Allen plans a residency in medicine and a private practice in western North Carolina.

JAMES DAVENPORT HUNDLEY: Jim, 26, comes from Wallace, North Carolina. He received the Bachelor of Arts degree in English from the University of North Carolina in 1963. Jim is engaged to Linda C. Brame of Durham, North Carolina and they plan to be married June 17, 1967. Jim will do a surgery internship at the William A. Shands Hospital of the University of Florida in Gainesville, Florida. He plans to do a residency in orthopedic surgery.

WILLIAM HENRY JARMAN, JR.: Bill is a native of Gastonia, North Carolina and is 26. He attended Davidson College and earned the B.S. degree in Pre-Medicine Science in 1963. He served as vice-president of the freshman class in medical school and as treasurer of the



Whitehead Society in 1964-1965. He is married to the former Julia Summerell, also of Gastonia, N. C. Bill and Judy will remain in Chapel Hill where Bill will do a surgery internship at North Carolina Memorial Hospital. He plans a residency in orthopedic surgery.

ROBERT HARVEY KEITER: Bob, who is 25, is a native of Kinston, North Carolina. He attended Davidson College, graduated in 1963 with a Bachelor of Science degree in Pre-Medicine Science. Bob will be going to Philadelphia, Pennsylvania to the Presbyterian University of the Pennsylvania Medical Center where he will do a medicine internship. After internship, Bob has plans for a residency, possibly in psychiatry.



SCOTT GERALD KLEIMAN: Scott is a native of Raleigh, North Carolina and he is 24. He was awarded the Bachelor of Science degree in Medicine in 1964 from the University of North Carolina. Scott will go to Chicago, Illinois where he will do a straight surgery internship at the University of Chicago Clinics. He plans a residency in orthopedic surgery.



JAMES RANDOLPH LANE, JR.: Jim, 25, is from Asheboro, North Carolina. He attended the University of North Carolina, receiving the Bachelor of Science degree in Medicine in 1964. He is a member of the Phi Chi Medical Fraternity. Jim will take a rotating internship, consisting of pediatrics and medicine, at Jackson Memorial Hospital in Miami, Florida. He plans to specialize after internship.



FRANK WALTER LEAK: Frank, 32, is from Rockingham, N. C. He attended the University of North Carolina where he received a B.S. degree in Business Administration in 1956. He and his wife, Betty, have two children, Laura and Beth. They will be moving to Charlotte, N. C., where Frank will do a Family Practice internship at Charlotte Memorial Hospital. He plans at least one more year of Family Practice Residency following internship.



HUGH TALMADGE LEFLER, JR.: Tam, 27, is from Chapel Hill, North Carolina. He graduated from the University of North Carolina in 1962 with an A.B. degree in Psychology. Tam and his wife, Connie, the former Constance Farthing from Wilmington, North Carolina, will be going to Lexington, Kentucky where Tam will do a rotating internship at the University of Kentucky Hospital. Tam plans a residency and practice in OB-GYN.



CLIFFORD THOMAS LEWIS, JR.: Cliff is 24 and comes from Beaufort, North Carolina. He attended the University of North Carolina and in 1964 he was awarded the Bachelor of Science degree in Medicine. He will be married June 17, 1967 to Miss Elizabeth Ann Beattie from Charlotte, North Carolina. Cliff will do a straight medicine internship at George Washington University Hospital in Washington, D. C. He plans a residency in internal medicine with a future practice in coastal North Carolina in the Beaufort area.



JOHN ZEBULON LITTLE: J. Z. is 24 and is from Albemarle, North Carolina. He attended the University of North Carolina following the three year pre-medical curriculum. J. Z. and his wife, Diane, also from Albemarle, North Carolina will be going to Springfield, Ohio where J. Z. will do a rotating internship at Mercy Hospital. J. Z. plans to enter the Air Force after internship. He plans a future in OB-GYN.



PHILIP RAY LITTLETON: Philip is 25 and is a native of Goldsboro, North Carolina. He attended the University of North Carolina and earned the Bachelor of Arts degree in Chemistry in 1963. He and his wife, India, the former India Smith of Atlanta, Georgia, will go to Gainesville, Florida, where Philip will do a straight pediatrics internship at the William A. Shands Hospital, University of Florida. Philip plans to take a residency in pediatrics.



JACOB ANDREW LOHR: Jake is 26 and is from Lexington, N. C. He graduated from the University of North Carolina in 1962 with an A.B. degree in English. He was vice president of the freshmen medical school class and he served as president of the Phi Chi Medical Fraternity in his third and fourth years. Jake is engaged to Elizabeth Doyle Waite of Mount Airy, N. C. and they will be married June 18, 1967. Jake will do a pediatrics internship at the University of Virginia Hospital and he plans a future private practice in Lexington, N. C.



ROBERT WILSON MADRY, JR.: Bob is 25 and is from Chapel Hill, North Carolina. A graduate of the University of North Carolina, he earned the Bachelor of Arts degree in English in 1963. He has served as treasurer of the Phi Chi Medical Fraternity. He is mar-

ried to Karen Gunderson Madry, formerly of Winston-Salem, N. C. Bob will do a medicine internship at Grady Memorial Hospital in Atlanta, Georgia. He plans a residency in internal medicine.

RICHARD BERNARD McADAM:

Bernie, 26, comes from Hendersonville, North Carolina. He attended the University of Florida and graduated with a B.S. degree in Biology from Wake Forest College in 1963. Bernie and his wife Carolyn, who is formerly from Mountain Home, North Carolina, will be going to Cincinnati, Ohio, where Bernie will do a straight surgery internship at Cincinnati General Hospital. Bernie plans a residency in neurosurgery.

WILLIAM JASON McDANIEL, JR.:

Jason is 25 and hails from Rutherfordton, North Carolina. He attended Davidson College as a pre-medicine major and earned the Bachelor of Science degree in 1963. He and his wife, Craig, formerly Craig Harris of Jacksonville, Florida,

will stay in Chapel Hill where Jason will do a straight surgery internship at North Carolina Memorial Hospital. He plans an orthopedic residency.

JAMES NORWILL McLAMB: Jim is 26 and is from Wilmington, North Carolina. He received the Bachelor of Science degree in Medicine from the University of North Carolina in 1963. Jim will do a rotating internship at the U. S. Naval Hospital in Oakland, California after which he will serve as a Navy

flight surgeon for three years. He is undecided about plans after service.

JOSEPH TIMOTHY McLAMB: Joe is from Clinton, North Carolina, is 25. He was awarded the Bachelor of Science degree from the University of North Carolina in 1963. He and his wife, Alma Kay, who is from Clinton, N. C., have one daughter, Marcia. Joe and his

family will be going to Nashville, Tennessee where Joe will do a straight surgery internship at Vanderbilt University Hospital. Joe plans a specialty in orthopedic surgery and a private practice in North Carolina.

GWYN FARRELL McNEELEY: Farrell

is from Hickory, North Carolina and is 25. He received the Bachelor of Arts degree in Zoology from the University of North Carolina in 1963. He and his wife, Sharon, formerly Sharon Nichols from Virginia Beach, Virginia, will be going to Gainesville, Florida where Farrell will take a surgery internship at the William A. Shands Hospital of the University of Florida.

DONALD HOWARD McQUEEN, III:

Don's home is in Laurinburg, N. C.; he is 25 and graduated from Davidson College in 1963 with a B.S. degree in Medicine. He was voted vice president of the Senior Class. Don is married to Ann, also from Laurinburg. They will

be moving at Atlanta, Ga. where Don plans to do a rotating internship at Grady Memorial Hospital.

BRENDA MERCER CRUIKSHANK:

Brenda 24, is from Parkersburg, West Virginia. She completed her undergraduate work at De Pauw University and spent two years at the Medical School of the University of Louisville before coming to the University of North Carolina School of Medicine. Brenda



was married December 29, 1966 to Dwight P. Cruikshank, a medical student at Duke University. She will do a pediatrics internship at Watts Hospital in Durham, North Carolina. She plans a career in maternal and child health.

RUDOLPH IVEY MINTZ, JR.: Rudy, 25, hails from Wilmington, North Carolina. He attended the University of North Carolina and in 1964 received the Bachelor of Science degree in Medicine. During his third year in Medical School, Rudy was a member of the Honor



Council and served as chairman of this council during his fourth year. Rudy will take a rotating internship at University Hospital, Hillman Clinic, Birmingham, Alabama. Rudy plans to specialize in either OB-GYN or Psychiatry.

JAMES MICHAEL MORTON: Mike, who is 25 and is from Greensboro, North Carolina, graduated from Davidson College in 1963. He earned the B.S. degree in Pre-Medicine Science. Mike and Betty, his wife who is also from Greensboro, N. C., will be going to San Francisco, California where Mike will do a rotating internship at Letterman General Hospital. Mike plans to take a residency in psychiatry or OB-GYN and to practice in eastern North Carolina.



LARRY MUMFORD: Larry is from Pikeville, North Carolina and is 26. He graduated from East Carolina College in 1962 with an A.B. degree in Science. He is married to the former Alice Walters who is from Greenville, North Carolina. They will be going to Charlottesville, Virginia, where Larry will take a pediatrics internship at the University of Virginia Hospital. Future plans call for a private practice in pediatrics in North Carolina.



JERRY LEE NORTON: Jerry is from Lake Toxaway, North Carolina. He attended East Carolina College and graduated in 1963 with an A.B. degree in Chemistry. Jerry received the Merit Scholarship in 1965-1966 and 1966-1967. In 1964 and 1966 he also received the Lange



Award and the Mosby Award. He is a member of the Alpha Omega Alpha, honorary medical fraternity. He served as class representative to the Whitehead Society in 1965-1966 and 1966-1967. Jerry and his wife, Peggy, who is from Sanford, N. C., will go to Cooperstown, New York where Jerry will do a rotating internship at Mary Imogene Bassett Hospital. He plans a residency in psychiatry and a future practice in the North Carolina mental health system.

JOHN BLANTON OVERTON: John, who is 25, is from Salisbury, North Carolina. A graduate of Davidson College, he received the B.S. degree in Pre-Medicine Science in 1963. John will be going to Gainesville, Florida for a straight surgery internship at the University of Florida William A. Shands Hospital. John plans a future practice in surgery.



HAROLD BURLEY OWENS: Harold is 26 and his home town is Forest City, N. C. He received a B.S. degree in Chemistry in 1963 from Wofford College. Harold and his wife, Evelyn, have two girls; Allison, age 5, and Malissa, age 2½. They will be leaving for Danville, Pa. where Harold will do a rotating internship at Geisinger Medical Center. His future plans will be to do a residency in Anesthesia with future practice in Anesthesiology.



HERMAN RICHARD PARKER, JR.:



Richard is 26 and is from Greensboro, North Carolina. He attended Guilford College and graduated from the University of North Carolina in 1962 with a Bachelor of Arts degree in Chemistry. He attended Duke University

School of Medicine 1963-1964. He and his wife, Brenda have two sons; Philip Glenn and Herman Richard, III. Richard will do a family practice internship at St. Joseph's Hospital in Syracuse, New York. He will continue the family practice program at St. Joseph's for one or two years and will probably return to North Carolina to set up a family practice.

BARBARA JEAN PARKS: Barbara, 25, is from Lexington, N. C. She graduated from UNC in 1964 with a B.S. degree in Medicine. During medical school Barbara was class secretary and received the Merit Scholarship her freshman and sophomore years. She was awarded the Mosby Book Award and was AOA her junior year. She will go to Colorado Medical Center in Denver, Colorado to do a straight surgery internship.



GERALD PELLETIER, JR.:



Jerry is 25 and a native of Stella, N. C. He received an A.B. degree in Chemistry from UNC in 1963. He was Whitehead Council Representative of the Freshman Class; and Secretary of Whitehead Council during his third year of medical school. Jerry and his wife, Mary Sue, originally from Trenton, N. C., have two children, Jay and Penny. Jerry will be going to Portland Memorial Hospital in Dallas, Texas where he will do a surgery internship and a residency in general surgery or Radiology.

BRUCE ALTON PHILLIPS, JR.:

Bruce, 25, is a native of Kinston, North Carolina. A 1963 graduate of the University of North Carolina, he earned the Bachelor of Arts degree in Chemistry. He served as the first year class representative to the Whitehead Society and on



the Honor Council during his second year. He is married to the former Nancy Crocker of Henderson, North Carolina. Bruce will do a rotating internship at the University of Kentucky Hospital in Lexington, Ky. He plans to take a residency in either internal medicine or family practice and plans to practice in eastern North Carolina.

WILLIAM BARKER RILEY, JR.:



Bill is 25 and is from Chattanooga, Tennessee. He was awarded the B.S. degree in Medicine from the University of North Carolina in 1963. He served as an Honor Council representative and as junior class secretary during Medical School. He is a candidate for the M.S. degree in Pathology as he was a research fellow in pathology in 1965-1966. On June 17, 1967, Bill will marry Mary Helen Harris of Henderson, North Carolina. He will take a straight surgery internship at the Palo Alto Hospital, Palo Alto, California. He plans a future in academic plastic surgery.

TED ROGERS:

Ted, who is 30, is from Waynesville, North Carolina. He graduated from the University of North Carolina in 1959 with a Bachelor of Science degree in Physics. He and his wife, Sally, will be going to Denver, Colorado where Ted will do a rotating internship



at General Rose Memorial Hospital. He will return to North Carolina Memorial Hospital for a residency in ophthalmology.

ALBERT LONSDALE ROPER, II: Al



is a native of Norfolk, Virginia. He attended the University of North Carolina and he earned the Bachelor of Arts degree from the University in 1963. Al is married to the former Nancy Carolyn Baker from Wilmington, Delaware. They

have a daughter, Margaret Alexander. Al will do a rotating internship at U. S. Naval Hospital in Portsmouth, Virginia.

JOEL EDWARD ROTHERMEL: Joel,

26, is from Winchester, Mass. He graduated from Kenyon College in 1962 with an A.B. degree in Biology.

During medical school Joel was president of Whitehead Society and president of the Junior Class. He plans to do a straight surgery

internship at Roosevelt Hospital in New York, N. Y. Joel's future plans are to continue in Orthopedic Surgery.

DOUGLAS MacARTHUR RUSSELL:



Doug, who is 25, hails from Dover, North Carolina. He attended the University of North Carolina and in 1964 was awarded the B.S. degree in Medicine. He has been a member of the Phi Chi Medical Fraternity

while a medical student. Doug will do a straight surgery internship at William A. Shands Hospital in Gainesville, Florida and he plans to specialize in surgery.

WALTER ROBERTS SABISTON: Wal-

ter hails from Kinston, North Carolina.

He attended the University of North Carolina and was awarded the Bachelor of Arts degree in History in 1963. He and his wife, Joan, the former Joan Rush of Kinston, N. C., will be going to Birmingham, Alabama where Walter will do a surgery internship at the University Hospital, Hillman Clinic. Walt

plans a residency in surgery.



JAMES HENRY SPRUILL, JR.: Jim



hails from Windsor, North Carolina and is 25. He attended the University of North Carolina and was awarded the B.S. degree in Medicine in 1964. He has been a member of the Phi Chi Medical Fraternity. He is married to the former

Gail O'Donnell of Little Rock, Arkansas. Jim will do a medicine internship at Emory University Hospital in Atlanta, Georgia, and plans a residency in either internal medicine or family practice.

HENRY CLAYTON THOMASON, JR.:

Henry is from Gastonia, North Carolina and is 24. He attended the University of North Carolina and was awarded the

Bachelor of Science degree in Medicine in 1964. He is a member of the Phi Chi Medical Fraternity. He and his

wife, Rosalind, also from Gastonia, will go to Springfield, Ohio, where Henry will take a rotating internship at Mercy Hospital. Henry plans to go into either general practice or internal medicine.



JOE WAYNE TIPPETT: Joe hails from



Zebulon, North Carolina and is 27. He attended Louisburg College and graduated from the University of North Carolina in 1962 with an A.B. degree in Zoology. He and his wife, Jo, formerly of Mt. Pleasant, North Carolina, have

one daughter, Stephanie Jo. Joe and his family will be going to Gainesville, Florida where he will do a straight surgery internship at William A. Shands Hospital, University of Florida. He plans a residency in surgery.

JAY ROBERT TUTTLE: Jay is a native of Fulton, Missouri and is 26. He earned the Bachelor of Arts degree in Zoology in 1963 from the University of North Carolina. He is married to the former Carol Harvey of Bethesda, Maryland. Jay will take a rotating internship at Walter Reed Hospital in Washington, D. C. His future plans call for a probable residency in surgery.



ZEBULON BAIRD VANCE: Zeb is a native of Macon, Georgia and is 26. He attended Davidson College and he graduated in 1962 with a Bachelor of Science degree in Pre-Medicine Science. Zeb will remain at North Carolina Memorial Hospital where he will do a pathology internship and he plans further specialization in pathology.



MARVIN DENNIS WACHS: Dennis, who is 25, is from Pittsboro, North Carolina. He attended the University of North Carolina, earning the the B.S. degree in Medicine in 1964. He served as vice president of the junior class in Medical School and served on the Honor Council for the Medical School. He and his wife, Irena, formerly Irena Louise Twiddy of Little Falls, New Jersey, will go to New Haven, Connecticut where Dennis will do a surgery internship at Yale-New Haven Medical Center. He plans a residency in surgery and eventually to enter private practice.



BENJAMIN KIRBY WARD, JR.: Benny comes from Goldsboro, North Carolina and is 26. In 1962 he earned the Bachelor of Arts degree from the University of North Carolina. He and his wife Starr, the former Anne Starr Minton from Greensboro, North Carolina, will be going to Miami, Florida where Benny will do a surgery internship at Jackson Memorial Hospital. Benny plans a future private practice in surgery.

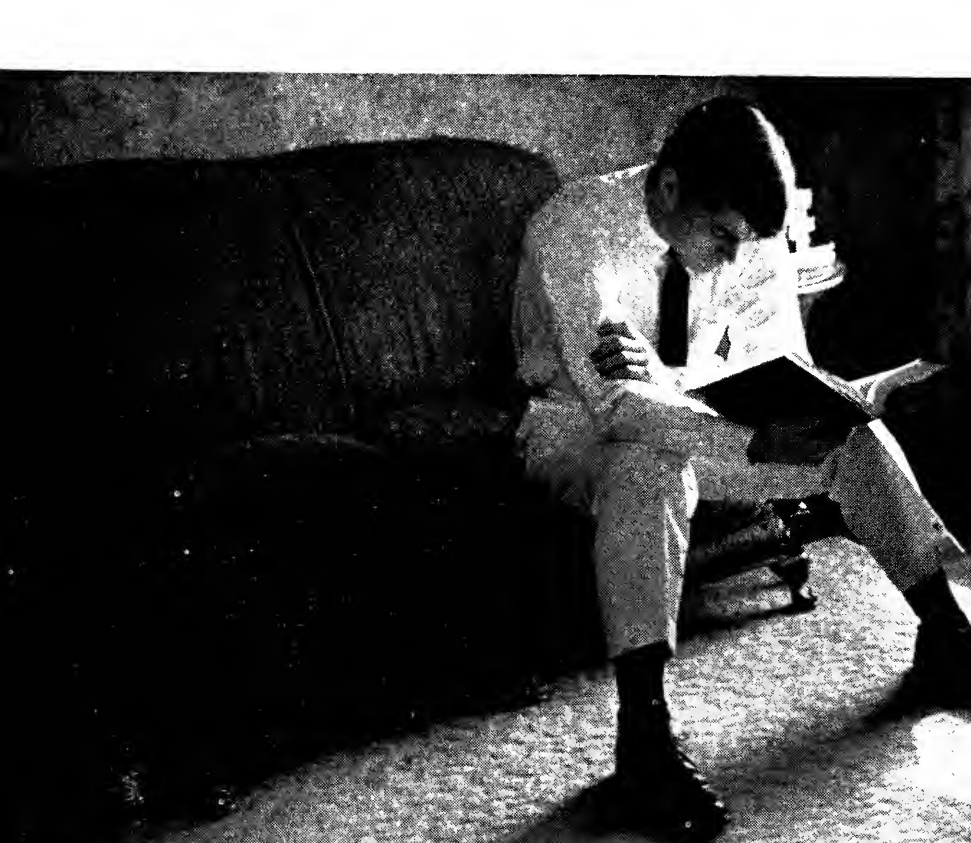


BARRY McNEIL WELBORNE: Barry is from Winston-Salem, North Carolina and is 25. He attended the University of North Carolina and graduated in 1963 with a Bachelor of Arts degree in Chemistry. He and his wife, Joanne, formerly Muriel Joanne Hogg of Pittsburgh, Pennsylvania, have one son, Kenneth McNeil Welborne. Barry will do a straight medicine internship at the University of Virginia at Charlottesville, Virginia. Barry plans a future practice in internal medicine in North Carolina.



RHODERICK THOMAS WILLIAMS, JR.: Rod is 25 and is a native of Farmville, North Carolina. He attended the University of North Carolina and earned the Bachelor of Science degree in Medicine in 1964. He was awarded the Alumni Loyalty Merit Scholarship for his freshman year in Medical School. He and his wife, Betsy, formerly Elizabeth Clark of Pinetops, N. C., will be going to Danville, Pennsylvania, where Rod will take a rotating internship at Geisinger Medical Center.





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Looking Back At The Class Of '67

by HARVEY J. HAMRICK*

Early next month the present fourth year class will graduate and, shortly thereafter, will disperse throughout the United States for internship assignments. It seems appropriate to recall some of the facts and characteristics of this class and to review several highlights of the past four years.

In the fall of 1963, the class had seventy-two members. Sixty-nine were natives of North Carolina, representing forty-two counties. The other three members represented three states—Massachusetts, Pennsylvania, and Georgia. Since then several students have joined the class from other classes or schools giving members from Tennessee, West Virginia and a foreign country, Germany. The original seventy-two members came from nine different colleges (UNC, Duke, Wake Forest, East Carolina, Wofford, Kenyon, Berea, and Princeton). There were seven Morehead Scholars in the group. The backgrounds were varied and included: seven veterans, one salesman, several outstanding college athletes, and some with medical research experience. Twenty-two were entering medical school after only three years of college. The ages ranged from twenty to thirty years. Fourteen of the entering students were married, and today forty-eight are married. At least five members plan marriage before July 1967.

The first year orientation program included several social events which gave us a chance to meet each other and some of the faculty. The stirring address by Dr. Floyd Denny, Chairman of the Department of Pediatrics, set the tone for a year which would require our utmost in study and effort. As we washed the formaldehyde off our hands after the first anatomy lab, we knew that our medical education was officially underway. In a few months, the long days of instruction became routine, and the original apprehensions began to ease as the first examination periods came and went. The course material was generally unlike undergraduate courses for few of us had been exposed to human anatomy, enzyme systems, or hormone mechanisms prior to medical school. In physiology several future surgeons did their first work in isolating vagus nerves and carotid arteries on living animals. Biochemistry had its unique moments as we supplied our own data for certain experiments. The large brown jars for 24 hour urine analysis were inconvenient, but the special diets were the limit. The fellow who had to eat three dozen oranges in one day has not eaten one since—not to mention the poor soul who drew the straight prune diet. Several went on a three day fast where the issues were blood and urine chemistry values and not the Viet Nam War.

We were saddened at mid-year by the death of Dr. A. Price Heusner, one of our most inspiring professors. The faculty established the Heusner Pupil Award in 1964 as a continuing tribute to Dr. Heusner, and the award went to one of our members in 1966.

At the end of the first year some took off completely and traveled; others began summer research projects; and some took jobs in unrelated fields to help with finances for the next year. Our eagerness to return for the second year stemmed as much from elation at no longer being a freshman as it did from

*Mr. Hamrick is President of the Senior Class of the U.N.C. School of Medicine.



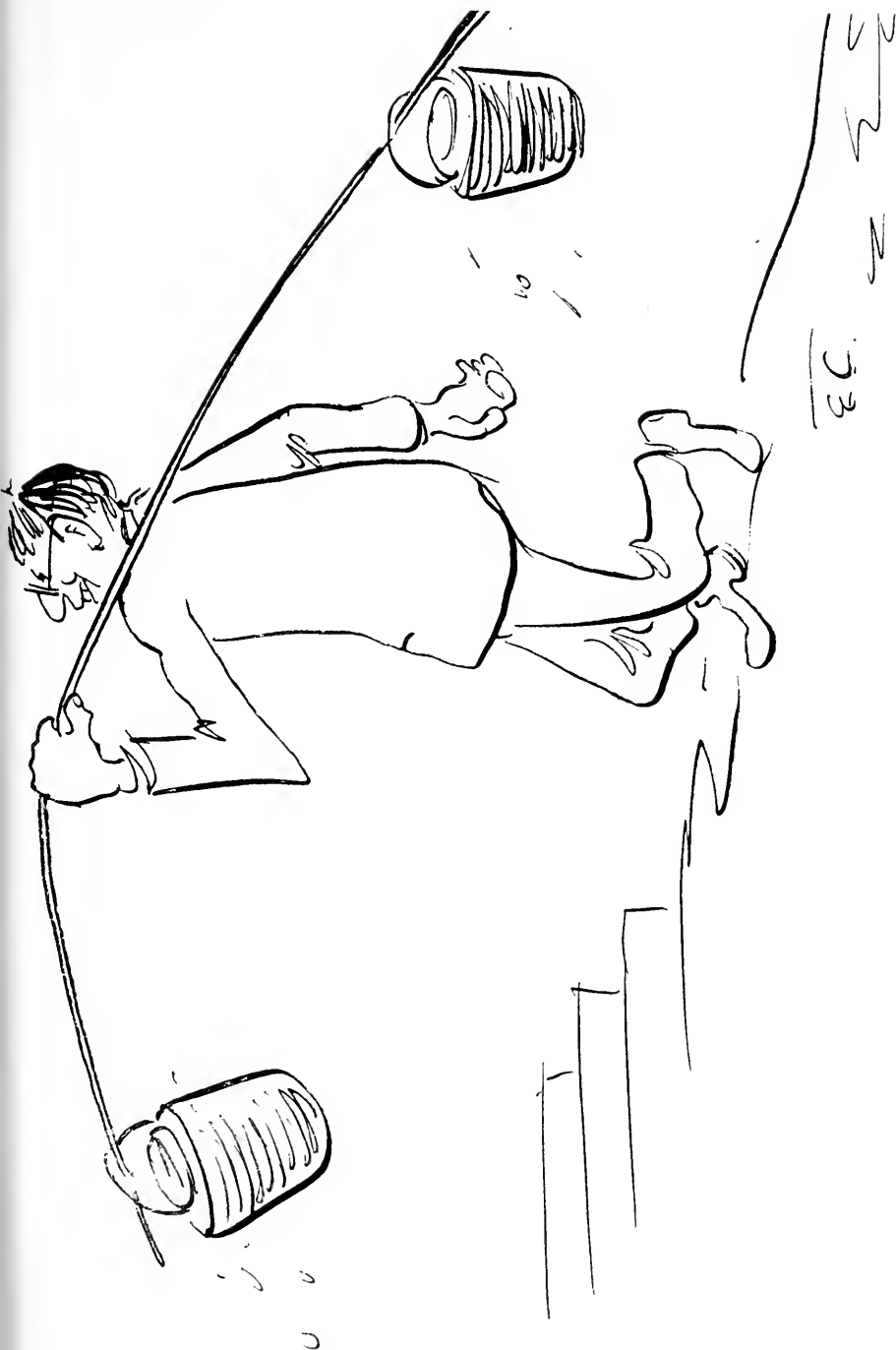
"following directions carefully in parasitology."

desire to continue our studies. The first year had emphasized normal human biological systems and processes. Now pathology classes delved into the abnormal as we examined tissue sections and slides of diseases, watched autopsies, and studied the essentials of bodily defense mechanisms. Pathology is remembered for its marathon slide sessions when, not infrequently, the dark auditorium and cushioned seats were too inviting to resist catching a few winks. On one such occasion after a particularly loud crash from the back of the auditorium, the instructor paused and asked if someone would please pick that young man up and put him back in his seat." Bacteriology provided contact with living pathogenic microorganisms as we examined culture plates, stained slides, and performed basic serology tests. Luckily there were no major infections but the professors were a little concerned over a possible typhoid epidemic when one student washed a slide containing *S. typhi* down the wrong drain and into Morgan Creek. However, our mistakes seemed minor when we learned that two students in a previous year had gotten the lab directions mixed up and had swabbed each other's throats with *C. diphtheriae*. The parasitology course offered another opportunity for exposure to pathogens but because of the nature of the lab materials we were careful to follow directions exactly.

Highlights of the second year included: finishing the winter quarter; the ethanol metabolism experiment in pharmacology; leading the medical school to victory in the graduate intramural athletic competition; and, of course, examining our first patients in the physical diagnosis sessions. Physical diagnosis came in the spring, and under careful supervision, we were exposed to the most obvious physical findings—the grade IV murmurs; massive ascites; visible masses and markedly consolidated lungs. Our feelings of inadequacy and our self-conscious fumbblings were impossible to conceal from most patients who, after inspecting the clean white coats and brand new instruments, could not resist commenting "you're just a student aren't you?" In these times of need we never seemed to remember the traditional psychiatric response of "why do you ask?", but rather mumbled obscure, defensive answers which only worsened the situation. The first patient write-ups were masterpieces of monotonous descriptive narrative with special emphasis on insignificant details. But the preceptors set us straight and enthusiasm for the third year began to mount.

The third year was definitely the hardest. The old axiom of "starting at the bottom" applied because as low man on the ward team, the third year "stud" was responsible for performing the routine ward procedures on his patient. However, we quickly realized that in addition to ward work we were expected to be versed in the latest concepts concerning the diseases encountered and to enter actively into patient care. The rotations of surgery, internal medicine, pediatrics, and psychiatry presented a wide spectrum of patients and diseases. With such exposure, we began to gain some idea of the specialty or area of medicine for which we might be best suited.

As the months passed, our proficiency in wardsmanship increased. The write-ups, at first cumbersome and disorganized, took form under the critical eyes of the residents. Diagnostic skills improved with repetition, and soon the interns would allow us to do the lumbar punctures and bone marrow aspirations. Each of us carried a coveted "pearl list" of which we were especially proud (a "pearl" is an unusually informative and useful piece of medical information,



"... the large brown jars were inconvenient."

the possession of which automatically gives a third year student a special advantage over his peers). Rapport with patients also became easier to establish as we worked with them under a variety of circumstances. Sometimes we related in a very personal way to patients, and strong inward reactions were engendered during the hospital course. As a severe infection responded to antibiotics, great satisfaction was felt; as certain incurable and poorly understood conditions ran their relentless course, extreme helplessness and discouragement plagued us. With the aid of those more experienced, we gained some insight into our proper role in such circumstances.

The supreme triumph of a third year student is to "scoop" someone higher on the ladder. This serves to keep the whole ward team on its toes because being scooped by a student is not the most pleasant thing for an intern or resident. Although it rarely happened, there were those few times when the hurried intern missed a subtle physical finding and had the painful experience of having it pointed out to him by the jubilant student.

The hours were long and the work was hard, but as the year ended, we each had that sense of real personal pride that only comes with hard work and accomplishment. We each knew that a significant step in our medical education was made. And even before the year was over, the pressure of internship competition was a real issue and decisions were forthcoming.

Internships kept us busy during the first part of the fourth year, and by the time the suspense of the internship announcements was over, it was time to concentrate on final examinations and graduation. The clinical rotations included outpatient care, acting internships, and specialty rotations. There were elective conferences on cardiology, radiology, and common clinical problems. There was more time to take advantage of the many clinical presentations, conferences, and lectures by outstanding visitors. In short, our actions were more directed and our goals more secure.

For the second time during our schooling, we experienced the unexpected death of an inspiring professor, Dr. Harry S. McGaughey, Jr., Chairman of the Department of Obstetrics and Gynecology. Those of us who were associated with Dr. McGaughey on the Ob-Gyn clerkship had tremendous admiration for him and keenly felt his loss.

Specific highlights of the fourth year included a tag football victory over the senior medical class at Duke; individual trips to distant hospitals searching for internships; and a gala week in New York City during Christmas vacation. Two busloads of seniors, wives and dates visited New York on the invitation of two drug companies, and everybody had an exhausting and fun-filled time. In spite of the tight schedule, class members still find time to continue the winning efforts on the intramural field, and currently the class pride is a top-notch softball team.

The past four years have made the members of the Class of 67 alike in many ways. This is only natural in view of having intensive daily associations, facing the same hurdles, and pointing toward the same goal. We have developed a definite sense of unity and a respect for each other. More important, we have developed a respect for the University of North Carolina School of Medicine. We know that this medical school, its faculty, and its contributions to medical



"... being scooped by a student"

science are highly thought of throughout the country. We have seen that it is a dynamic institution which is continually expanding and adapting both curriculum and physical plant. We are confident that it will continue to provide unlimited opportunities in any area of medicine for the curious, the interested, and the energetic. The Class of 67 is proud of its school and is looking forward to a continued association—even if it might be a long-distance one.

Medical Parents' Club Meets



Frank Cella

Members of the Medical Parents' Club at the University of North Carolina School of Medicine have elected Frank Cella of Raleigh as president for the coming year.

He is administrative vice president and secretary of Cameron-Brown Co.

Other officers elected during the 11th annual meeting here were: first vice president, Dr. Robert D. Croom Jr., of Maxton; second vice president, Dr. Don R. Printz of Asheville; and secretary, L. O. Branch of Durham.

Shown below with Dean of the Medical School, Isaac M. Taylor, M.D. (front row, right) other elected officers of the Medical Parents' Club are: (left to right, front row) Mr. W. T. Harris of Charlotte; Dr. Key Lee Barkley of Raleigh and Mr.

William F. Algary of Asheville, outgoing president; (second row) Mr. Charles C. Dudley of Charlotte; Mr. L. O. Branch of Durham; Dr. Robert D. Croom, Jr. of Maxton; Judge R. I. Mintz of Wilmington and Mr. V. J. Spivey of Williamston.



Admission To Medical School, 1967

By CHRISTOPHER C. FORDHAM, III, M.D.*

It is perfectly clear that a career in medicine today offers a challenging, exciting and rewarding opportunity for able and dedicated young men and women. The needs are great; the opportunities for service are compelling; and the intellectual challenge of learning about man and his ills is increasingly promising. There is ferment in medical education; in cognizance of the lifetime of learning which is required of medical graduates, medical curricula are tending to put more responsibility on the student for his medical studies. Departmental lines are blurred, and departments are teaching cooperatively. Choices are becoming available to the student. Modalities in the delivery of medical care are very much a matter of discussion and study. Basic and clinical research are less easily separable. Communications among scientists and the translation of medical science to the bedside are major challenges.

What of the preparation for medical school? What are the chances for gaining admission to medical school? What level of academic performance is required and what else is important? These questions, often asked by students and parents do not lend themselves to simple answers. But they are tractable questions, and we should try to answer them as best we can from year to year.

An increase in the number and quality of applications to medical schools throughout the country during the past several years assures continued keen competition for admission to medical school. The increased number of applicants is offset somewhat by gradually increasing numbers of available places, as present schools expand, and as new schools are developed. But it is likely that medical schools will continue to attract among the ablest of college students in the foreseeable future and that the aspiring student will therefore have to compete favorably in order to qualify.

The matter of predicting success among applicants has been a source of much concern in educational and occupational fields, and numerous techniques have been utilized for screening and selection. It is fair to say that medical school admissions committees have been among the hardest working groups in their study of applicants, and have in general needed to rely on the hard information relating to student performance. In the evaluation of a student's academic record, admissions committees consider the school from which he (or she) comes, the formidability of the curriculum undertaken, and the directional character of his performance as he has proceeded. An admissions committee is certain to be interested in the applicant's extracurricular interests and activities and his or her maturity and growth as an individual as well as competence as a student. Applicants to medical school are required to take the nationally administered Medical College Admission Test which is given twice annually throughout the country. This test is ordinarily taken in the spring of the junior year or the fall of the senior year and tests the applicant's ability to deal with material in several major categories, including verbal ability, quantitative

* Dr. Fordham is Associate Professor of Medicine and Assistant Dean of Student Affairs. He is Chairman of the Committee on Admissions for the U.N.C. School of Medicine.

ability, general information, and science. There is much debate about the meaning of the scores made available to committees from this test, but there is a general correlation with other evidences of the individual's ability. While not a primary datum, the scores from this test are used by most admissions committees as an additional measure of academic potential. Letters from faculty where the student has attended college can be helpful to an admissions committee in providing information which is not reflected in grades alone. Interviews with promising applicants are conducted by medical faculty members. These interviews are not heavily weighted, since there is little evidence that one can predict success from interview, but interviews do serve as an initial form of communication between applicants and faculty and often provide helpful information in the overall evaluation of an applicant's record, his interests and his ability to communicate.

To summarize, admissions committees are concerned with a) academic qualifications, and b) personal qualifications, in assaying the overall promise of individual applicants to schools of medicine. It should be clear that evidence of academic competence is necessary for favorable consideration by an admissions committee. The school, the student, and society in general have too much invested in entry into medical school to admit a student whose academic qualifications are questionable or marginal. Among those who are academically qualified, committees seek to enroll students with the strongest possible personal qualifications and those who appear to present the likelihood of sincere devotion to medicine.

The choice of a major is sometimes a problem to students who are interested in medicine, and rumors as to majors favored by medical school admissions committees apparently may sometimes dictate choices. Actually, there is a substantial difference of opinion among medical faculties and the medical profession about the best preparation for medical school. In general, committees would urge a student interested in medicine to choose a formidable college curriculum at the best college for which he can qualify, to pursue his scholarly interests in depth, and to show real evidence of ability and dedication in his chosen field of study. Many would prefer that his major be a natural science, but would not discourage the able student who majors in other disciplines.

Financial aid for students after admission to medical school is in the form of loans and grants-in-aid. Funds to support medical students from both sources are much greater than in the past, and once admitted, students do not ordinarily leave the school for financial reasons. On the other hand, some students are undoubtedly discouraged from applying in anticipation of the financial needs for medical education. It should therefore be emphasized that a needy student who can qualify for medical school can receive assistance in the form of loans and grants-in-aid and can complete his education with a loan which is much smaller than was the case a decade ago.

From what has been said here, it may seem that the prospect of admission to medical school is slim for any applicant who does not consider himself a scholar. However, a few students enter the school with an academic average of 2.5 or slightly less, so that an overall mediocre record may at times be offset by a strong record in the sophomore and junior years and by other areas of strength and accomplishment adding to the overall promise of an individual student is deemed to have.

(Continued on page 36)

Sitterson Appointed To National Medical Council



Dr. Joseph C. Sitterson, Chancellor of the University of North Carolina, has been appointed to the *National Advisory Allergy and Infectious Diseases Council*, it was announced recently by Dr. William H. Stewart, Surgeon General of the Public Health Service.

He participated in a recent Council meeting and his term continues until February, 1971. As a council member, Dr. Sitterson will advise the Surgeon General on grant activities of the National Institute of Allergy and Infectious Diseases, one of the eight National Institutes of Health. Upon the recommendation of the NIH National Advisory Councils, the Surgeon General awards grants to research scientists in universities and other non-Federal institutions.

An eminent teacher and historian, Dr. Sitterson has written or edited seven books, is a contributor to historical reviews, and is a member of the board of editors of the *Journal of Southern History*. He has taught at the University of North Carolina at Chapel Hill since 1935, was named dean of the College of Arts and Sciences in 1955, and dean of the general college in 1961. He became vice chancellor in 1965 and chancellor last year. He has been Kenan Professor of History since 1961.

The past chairman of the American Conference of Academic Deans, Dr. Sitterson is also a member of the American, Southern, and Mississippi Valley Historical Associations.

Before joining the University teaching staff, he was on the faculty at Georgia Military Academy, and was director of the North Carolina Hall of History at Raleigh in 1934-35. He received his A.B., M.A. and Ph.D. degrees from the University of North Carolina. Dr. Sitterson was awarded a Social Science Research Council fellowship in 1931-32 and a Julius Rosenwald fellowship in 1940-41.

A Donation For Research Equipment



J. Leonard Rawls, Jr.

Shares of stock have been donated to the medical school by a Rocky Mount businessman for use in purchasing research equipment in the Department of Medicine.

The donor of the stock, J. Leonard Rawls, Jr., is the president and director of Hardee's Food Systems, Inc.

He is a native of Rocky Mount and a former UNC student. He was awarded a BCS degree from the Benjamin Franklin University in Washington, D. C., and engaged in graduate work at East Carolina College.

He conducted a public accounting practice for four years after serving with the U. S. Army and before becoming president in 1961 of the food

systems chain.

Mr. Rawls is a member of the Board of Managers of Planters National Bank and Trust Co. and is a member of the Mission Board and a layreader at St. Andrews Episcopal Church. He is a former treasurer of the Mission Board at Christ Episcopal Church.

He is married to the former Nancy Lee Williams of Battleboro and they have two children, Vivian Lee, 10, and Joseph L. III, 8.

Mr. Rawls's brother, Dr. William C. Rawls, is a 1966 graduate of the U.N.C. School of Medicine. He was president of the senior class and is now an intern at N. C. Memorial Hospital.

— Admission To Medical School, 1967 —

(Continued from page 34)

The high school and college students of today are the clinicians, teachers, and investigators of tomorrow, and essential tasks of medical faculties and the profession at large are to encourage and excite where real promise exists, to discourage where only frustration awaits, and to recruit and select those students with the greatest potential for accomplishment and service as physicians.

N. C. Memorial Hospital:

Its Past, Present And Future

*by DEMONT ROSEMAN, JR.**

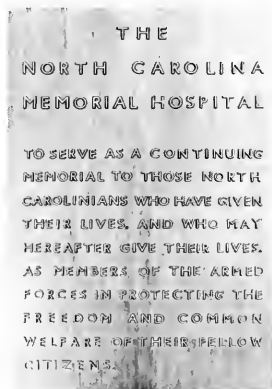
On Friday 13th in April, 1951—two days before the N. C. General Assembly wound up a busy 102-day session—the state's only tax-supported general hospital under construction in Chapel Hill was designated a war memorial.

Legislators directed under the authority of a bill originating in the House

*Mr. Roseman is Assistant Director, U.N.C. News Bureau.

that the teaching hospital to be affiliated with the University of North Carolina School of Medicine be a memorial to the state's war dead.

A bronze plaque signifying that the wishes of the General Assembly are a reality is publicly displayed in the lobby of N. C. Memorial Hospital, a constant reminder that the institution is "a continuing memorial to those North Carolinians who have given their lives, and who may hereafter give their lives, as members of the armed forces in protecting the freedom and common welfare of their fellow citizens."



The idea to build a teaching hospital for the UNC medical school and to have it honor the state's veterans was not new. Historians note that the idea was first proposed in the early 1920's.

N. C. Memorial Hospital was scheduled to open about eight months after it dropped its informal title of "University Hospital" and adopted its formal title.

But frustrating construction delays caused what Hospital Director Robert R. Cadmus tolerantly called "unfortunate postponements of our activation schedule."

Dr. Cadmus chronicled in one of his first annual reports the reaction to the official naming of the hospital:

"Although there were those who looked forward to the change of name, there were equally those who felt that giving up the term 'University Hospital' was unfortunate because 'University Hospital' has become a hallmark of quality in the field of medical care."

It was the "Permanent Improvement Appropriation Act of 1947" which provided almost \$5.3 million for the expansion of the UNC medical center. Of this amount, \$3.8 million was combined with funds from the 1949 legislature and earmarked for the construction of a 400-bed hospital.

The funds were a part of the state's unique Good Health Program, heralded as "a medical renaissance in North Carolina." The renaissance centered on Chapel Hill and permitted, among other things, the offering of medical degrees by the University for the first time in about 40 years.

When the hospital embarked on its 1951-52 fiscal year, the director and his secretary were the only two members on the staff.

As the year progressed, the staff expanded to 25 on duty and 32 others committed to arrive in the near future. More than a year later, when the first

patients were finally admitted, the staff had grown to almost 300 and by the middle of 1953 the employee roster totaled over 500.

The humble beginning prompted Dr. Cadmus to remark in his first annual report that 1951-52 "is destined to be one of the most historic years in the hospital's eventual brilliant history for it has been during this year that many of its basic foundations have been laid.

"It appears that these foundations have been so firmly set that a sound structure for the future is generally assured."

The delays in the construction schedule persisted. It was not until Sept. 2, 1952, when the first patient—Mrs. John F. Bolton of West End in Moore County—was admitted.

She and six other patients were occupying beds on the fifth floor by midnight. Only 76 beds were open to patients that first day.

By the end of the first week, 20 patients were in the hospital. And at the close of the first 10 months of operation, 155 beds were open and the hospital was accepting all types of cases except the violently disturbed psychiatric patient and premature babies.

The outpatient clinics were booming. More than 10,000 outpatient visits and nearly 3,000 emergency room visits were recorded in the first 10-month period.

The formal dedication was not until the following year. The cornerstone was laid with appropriate Masonic ceremonies on the afternoon of April 15, 1951, but the official dedication, combined with the dedication of the new nursing and dental schools and the expanded medical school, was not until April 23-24, 1953.

Hospital expenditures during the first fiscal year totaled about \$1.5 million, compared to \$7.12 million last year. During this period, the number of beds tripled, the number of employees climbed to almost 1,000 and occupancy reached an average of 86 per cent.

The second fiscal year of operations, when costs were first tabulated, a bed patient was costing \$32.40 a day and an outpatient was costing \$9.04 a day. Costs dropped the following year, but then began a normal, continuous climb. Last year, the bed patient's care was costing \$46.54 and the outpatient's care had reached \$14.48.

At least \$2 of every \$3 in operating costs have gone for wages and salaries, which is about standard for hospitals.

A teaching hospital is a referral hospital, admitting the more seriously ill and injured patients. This is reflected in the average number of days a patient remains here.

Additionally, N. C. Memorial Hospital has traditionally cared for a large percentage of patients unable to pay their own bills. About seven of every 10 days of care have been for the charity—or staff—patients. And staff patients normally require longer hospitalization.

Last year, for example, the average patient remained in the hospital for 10.7 days. The private patient averaged eight days for his illness while the staff patient averaged 11.7 days.

N. C. Memorial Hospital served almost 125,000 inpatients and outpatients during its first decade of operations. It had not yet reached its assigned capacity of 400 beds, but had increased from 135 beds to 311 beds.

The hospital was fortunate in its first year to attract 55 interns and residents for the house staff. Last year, the house staff reached a peak of 197 interns, residents and special fellows.

Among the hospital's historic highlights are:

A training program for X-ray technicians was established in the spring of 1953.

The chancellor decided in the spring of 1956 that the administration of the hospital should be shifted to the dean of the medical school. This became an established fact on Sept. 1, 1956.

About three months later, a 14-bed premature suite—a special care unit for sick newborn infants, regardless of prematurity—was activated.

Students began arriving in 1957 to begin training as medical technicians.

A year later, two floors were added to the Psychiatric Center and the 7th floor deck of the main hospital was enclosed as an indoor area (now known as the Playroom).

And a newborn nursery with round-the-clock coverage became a reality in early 1958.

The cytotechnology training program was formalized in 1960.

The hospital pioneered in the use of special care (intensive care) for the critically ill and injured by constructing a new unit in 1961. The same year, remodeling began on the fifth floor for another medical innovation, the Clinical Research Unit.

Dr. Cadmus, taking notice that administrative crises seemed to be simmering down, rounded out 12 years as hospital director and stepped out to become head of the new Department of Hospital Administration. He was succeeded by Eugene B. Crawford Jr., who served for four years before resigning and being replaced by the current director, William L. Ivey.

The only new position authorized in the hospital by the 1961 General Assembly was for a hospital chaplain. Appointed to the position—and still in the position—was Chaplain Fred W. Reid.

Activation of a medical research wing adjacent to the medical school brought temporary relief from space problems during 1961-62. But only two years elapsed before more relief was sought. Trailers were appealed for, the number growing rapidly to 12.

Training for operating room technicians began in 1964.

The "two big projects" occupied most of the conversation at the hospital beginning about three years ago. One big project was the hospital air-conditioning, now completed. The other was the \$10.6 million ambulatory patient care facility, now under construction and due for completion in 1969.

The number of outpatient visits climbed last year past the 120,000 mark and the number of emergency room visits approached the 10,000 mark. This occurred as hospital occupancy hovered near the 90 per cent level.

If a theme can be separated out of the contents of the hospital's annual reports for the last 14 years, it might easily be borrowed from an anonymous quotation in Crawford's review of accomplishments and problems for 1962-63:

"A man's (a hospital's) character is judged by what he does with what he has."

N. C. Memorial Hospital, still a teenager, has made a monumental contribution to the living while serving as a memorial to the war dead.

Presenting the Faculty



An honorary Doctor of Science degree was awarded to Dr. Kenneth M. Brinkhous by the University of Chicago at its 317th convocation in mid-March.

Dr. Brinkhous is Distinguished Alumni Professor of Pathology and chairman of the Department of Pathology at the UNC School of Medicine. He has been a member of the medical faculty in Chapel Hill since 1949.

The citation accompanying Dr. Brinkhous' honorary degree referred to his outstanding contributions to the understanding of hemophilia and stated that he "now is generally recognized to be the world authority on the disease."

He was presented for his degree by Dr. Robert W. Wissler, professor and chairman of the Department of Pathology at the University of Chicago.

Prior to joining the UNC medical faculty, Dr. Brinkhous was on the faculty of the State University of Iowa, from which he received his A.B. degree in 1929 and his medical degree in 1932.

Since 1934, his investigative work has focused on diseases of the body's blood-clotting system.

He is currently president of the Federation of American Societies for Experimental Biology and presided over their 51st annual meeting in Chicago in late April.

Dr. Janet J. Fischer, assistant professor of medicine, is one of two honorary Valkyries for 1967 tapped into membership in pre-dawn ceremonies in mid-March.

The Order of the Valkyries is the highest women's honorary organization at the University of North Carolina.

A citation referred to Dr. Fischer as "one who serves with intensity and genuineness of purpose her chosen field of medicine and infectious disease, while managing the role of wife, mother and active citizen of the community."

"No matter how busy she is, she always has time to devote her full attention to students seeking help or advice.

"She is an individual deeply concerned with significant issues and she demonstrates courage, insight and a sense of tolerance that is rare.

"Her undaunted enthusiasm in giving of herself and adherence to the highest ideals enriches the lives of those who know her."



Dr. Fischer joined the UNC medical faculty as an instructor and research assistant in 1952. Her major research interests have been in the fields of infectious diseases, pulmonary diseases and urinary tract infections.

Her husband, Dr. Newton D. Fischer, is head of the medical school's Division of Otolaryngology.



Dr. Harvey E. Mayberry, assistant professor of anatomy, joined the UNC medical faculty as an instructor immediately after receiving his Ph.D. from the University of Mississippi in 1964.

For a year after his graduation with a bachelor of science degree from Tennessee Polytechnic Institute in 1958, he was a research technician in the Department of Anatomy at Vanderbilt University.

Dr. Mayberry is a 30-year-old native of Fentress County, Tenn., and is married to the former Ann Bryant of Magee, Miss. They have one son, four-year-old William Edward Mayberry.

Dr. Mayberry's major research interest is in the role of hormones in mammalian reproduction.

Dr. Richard I. Walker, associate professor medicine, received a 1966 Research Career Development Award from the National Cancer Institute. The award, made on the basis of national competition, is one presented by the National Institutes of Health designed to increase the number of full-time career opportunities for health scientists of superior potential and capability. The NIH awards provide full salary support for the recipient.

Dr. Walker has been actively engaged in research on the physiology of leukocyte production and destruction and on the function of leukocytes in normal and disease states.

Following his graduation from UNC in 1950 with a bachelor of science degree, he became a teaching fellow in anatomy during his first two years of medical school at UNC. He is a native of Winston-Salem.

His medical degree was awarded to him in 1954 at Harvard University. During his final year at Harvard he served as a research assistant in the Huntington Research Laboratory at Massachusetts General Hospital.

He returned to Chapel Hill for a year of internship before entering the U. S. Air Force Medical Corps for two years. Following his military duty, he became a resident at N. C. Memorial Hospital. From 1959 to 1961 he was a Research Fellow in Hematology at UNC and then became a Special Fellow in Hematology for an additional year. As an instructor in medicine at UNC in 1962, he was promoted to assistant professor in 1963 and to associate professor in 1965. He was appointed a Scholar of the Leukemia Society from 1962 to 1966, and he was elected a member of the Southern Society for Clinical Investigation in 1962.

Dr. Walker is married to the former Jane Carter of Chapel Hill and they have two children.



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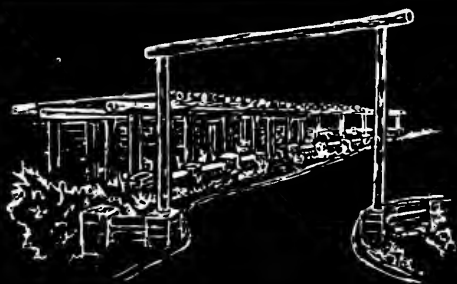


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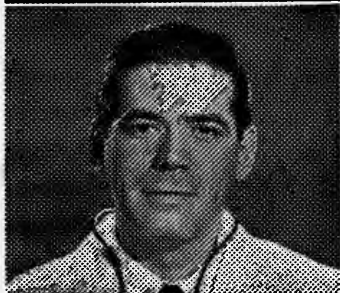
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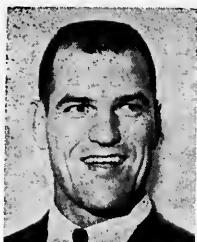
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